

vent Date	00000000
ACLE DOTO	02/20/2019

## Statement of Contributions Received at a Social or Fund-Raising Event

Form 31-E

P C 2517 40(D)

F. II N					R.C. 3517.10(B)
Full Name of Committee					
Gahanna Residents Improving Tomorrow				,	
Full Name of Contributor			Registration Number, if PAC		
Janet Schwarz		_			
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
500 Beaverbrook Dr				02/20/2019	35.00
City		State	Zip Code	Form (Cash, Check, Etc	and second and the second second second second
Gahanna		OH	43230	Cash	
Full Name of Contributor	L			Registration Number, if PAC	
Angie & Shane Ewald					
Street Address	Address Employer/Occupation/Labor		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
1323 Lindenwald Dr	323 Lindenwald Dr			02/20/2019	100.00
City		State	Zip Code	Form (Cash, Check, Etc	lt. 1 5 1
Gahanna	(	ОН	43230	Check	Appropriate Control of the Control o
Full Name of Contributor			Registration Number, if PAC	<u> </u>	
Laurel Naegele					
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount	
786 Caroway Blvd				02/20/2019	50.00
City		State	Zip Code	Form (Cash, Check, Etc	
Gahanna		ОН	43230	Check	
Full Name of Contributor				Registration Number, if PAC	
Virginia Hoffman					
Street Address	ddress Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount	
'08 Waybaugh Dr		02 <i>/</i> 20 <i>/</i> 2019	40.00		
City	-	State	Zip Code	Form (Cash, Check, Etc	
Gahanna	C	OH	43230	Cash	
Full Name of Contributor			Registration Number, if PAC	10.	
Zac Guthrie					
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
471 Beaverbrook Dr				02/20/2019	62.00
City		State	Zip Code	Form (Cash, Check, Etc	Strands to the second of the s
Gahanna		ОН	43230	Check	
			1.6	16	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from No. 31-E" and list the date of the event in the date column

Total	Contributions	This	Event

Total Expenditures This Event

Page Total \$	287.00	

<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]