



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

Form 31-E  
R.C. 3517.10(B)

<b>Full Name of Committee</b> Re Elect Westcamp for Mayor				
<b>Full Name of Contributor</b> Bruce Boyer			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 694 Elm St	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09 30 19	<b>Amount</b> \$ 40 -
<b>City</b> Groveport	<b>State</b> OH <input checked="" type="checkbox"/>	<b>Zip Code</b> 43125	<b>Form (Cash, Check, Etc)</b> cash	
<b>Full Name of Contributor</b> Abdullah Ansar			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 4105 Williams Rd	<b>Employer/Occupation/Labor Organization*</b> Self employed Norms Market-Gro.		<b>Date (MM/DD/YYYY)</b> 09 30 19	<b>Amount</b> \$ 250 -
<b>City</b> Groveport	<b>State</b> OH <input checked="" type="checkbox"/>	<b>Zip Code</b> 43125	<b>Form (Cash, Check, Etc)</b> check	
<b>Full Name of Contributor</b> James Grube			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 13905 Whispering Ct	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09 30 19	<b>Amount</b> \$ 50 -
<b>City</b> Pickerington	<b>State</b> OH <input checked="" type="checkbox"/>	<b>Zip Code</b> 43147	<b>Form (Cash, Check, Etc)</b> check	
<b>Full Name of Contributor</b> Kristy Nichols			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 5245 Hayes Rd	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09 30 19	<b>Amount</b> \$ 50 -
<b>City</b> Groveport	<b>State</b> OH <input checked="" type="checkbox"/>	<b>Zip Code</b> 43125	<b>Form (Cash, Check, Etc)</b> cash	
<b>Full Name of Contributor</b> Steve Phillips			<b>Registration Number, if PAC</b>	
<b>Street Address</b> 430 Tallman	<b>Employer/Occupation/Labor Organization*</b>		<b>Date (MM/DD/YYYY)</b> 09 30 19	<b>Amount</b> \$ 40 -
<b>City</b> Groveport	<b>State</b> OH <input checked="" type="checkbox"/>	<b>Zip Code</b> 43125	<b>Form (Cash, Check, Etc)</b> cash	

\* 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)]

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 form No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 430 -