Statement of Contributions R The State Discousing and s no Ment a atea. Social or Fund -Raising Event Pret Office's grand and two-fetter abureviduon. For example specific date. It is not unconsmon for activity from one event to Order voorde anders as Ord combanic, colab sit esusped from and nati the c. 35171018 The Date block should be completed with six digits. ENLINAME of Committee ment bevisoes activation of a constitution of the constitution o The date that the event was next should appear on he line at the top-of the cace scheded Event Date registration man received to NOON and to Union adjusted to the party of the NOON of the control of the party of the control of the c Registration Number, if PAC bas bevious point years Full Name of Contributor n must sourcer within the report. "Psssing the h MANDEATON OF TO SE to 5065 Greenwood at was Relined (1000)5/1: equilibrino Registration Number of PAC Friends of Jim Graham Employer/Occupation/Labor Organization Amount environ to estisa 108-28-201 9 in nout **O Grab S**udmino Greenwood Rd eit/council Form (Cash, Check, Etc 43213 Seriidinico ed ton vem a sunmerise the monstary activity of the event chins orm and Statement of Expendences for Social or enoras Miller Ampud risit erill Date (MM/DD/XXXX) 15 910 Collingwood the 31-4) along with the date of the event. The **VIO** special first the total of in Landschild in their OH to is no way to determine Registration Number, ICRAPAGE T125 O SE echo texto Full Name of Contributor Sharon Soma Employer/Occupation/Labor Organization* Date (MM/DD/YYYY) 578 Ross 08-28-2019 100,00 Refired Form (Cash, Check) Elic Zio Code City Whitehall 43213 Recistration Number, if PAC Stere Blake ion/Labor Organization* Date (MM/DD/YYYY) Maplewood Ave 50,00 09-28-2019 Zip Code Whitehall 44219 * 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 d

Total Expanditures This Event

Page Total \$ 334.29

event in the date column

Total Contributions This Event

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