

Event Date	09/09/2019	Page	6

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

Form 31-E

.C. 3517.10(B)

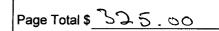
					R.C. 3517.10(B)
Full Name of Committee					
Motil for City Council					
Full Name of Contributor				Registration Number, if PAC	
Michael La Rowe					
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount	
144 E Schreyer Pl	City of Columbus		ous	09/09/2019	40.00
City	4	State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43214	Cash	
Full Name of Contributor			<u> </u>	Registration Number, if PAC	
Paisha Thomas					
Street Address	Employe	er/Occupa	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
93 E Selby Blvd	Musician, self employed		09/09/2019	5.00	
City		State	Zip Code	Form (Cash, Check, Etc	
Worthington		ОН	43085	Cash	
Full Name of Contributor		Registration Number, if PAC			
Ron White					
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount	
2467 Summit St	Nationwide Childrens Hospital		ildrens Hospital	09/09/2019	40.00
City	<u> </u>	State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43215	Cash	
Full Name of Contributor				Registration Number, if PAC	
Aaron Snyder					
treet Address Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount		
2847 Melva Ave	Owner, Dick's Den		Den	09/09/2019	200.00
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43224	Cash	e en
Full Name of Contributor			Registration Number, if PAC		
Raymond Sauer					
Street Address Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount		
526 E Como Ave	Retired			09/09/2019	40.00
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43202	Cash	villa de la companya

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	Conti	ibutions	This	Event

Total Expenditures This Event



^{*} 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)]