



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

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

Full Name of Committee <u>Committee to Elect Lori Trause</u>				
Full Name of Contributor <u>Kristi Ghidotti</u>			Registration Number, if PAC	
Street Address <u>1444 W. Chelton Road</u>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>9/19/19</u>	Amount <u>\$50.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43212</u>	Form (Cash, Check, Etc) <u>Check</u>	
Full Name of Contributor <u>Linda Heinzerling</u>			Registration Number, if PAC	
Street Address <u>2464 Edington Road</u>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>9/19/19</u>	Amount <u>\$25.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43221</u>	Form (Cash, Check, Etc) <u>Check</u>	
Full Name of Contributor <u>JENNIFER HEALD</u>			Registration Number, if PAC	
Street Address <u>7979 Riverside Drive</u>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>9/19/19</u>	Amount <u>\$25.00</u>
City <u>Dublin</u>	State <u>OH</u>	Zip Code <u>43006</u>	Form (Cash, Check, Etc) <u>Check</u>	
Full Name of Contributor <u>THE OWENS</u>			Registration Number, if PAC	
Street Address <u>3950 RITA MARIE DRIVE</u>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>9/19/19</u>	Amount <u>\$50.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43220</u>	Form (Cash, Check, Etc) <u>Check</u>	
Full Name of Contributor <u>Deanne Jackson</u>			Registration Number, if PAC	
Street Address <u>2494 Woodstock Road</u>	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) <u>9/19/19</u>	Amount <u>\$50.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43221</u>	Form (Cash, Check, Etc) <u>Check</u>	

* 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
\$2,366.00

Total Expenditures This Event
00

Page Total \$ 200.00