



# 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> Committee4Children				
Full Name of Contributor John Pribble			Registration Number, if PAC	
Street Address 756 Jaeger Street	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05 21 19	Amount 250
City Columbus	State OH <input type="checkbox"/>	Zip Code 43206	Form (Cash, Check, Etc) Paypal	
Full Name of Contributor National Youth Advocate Program			Registration Number, if PAC	
Street Address 1801 Watermark Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05 21 19	Amount 400
City Columbus	State OH <input type="checkbox"/>	Zip Code 43215	Form (Cash, Check, Etc) Paypal	
Full Name of Contributor Donald Spicer			Registration Number, if PAC	
Street Address 1145 Baumock Burn Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05 21 19	Amount 100
City Columbus	State OH <input type="checkbox"/>	Zip Code 43235	Form (Cash, Check, Etc) check	
Full Name of Contributor Necol Russell Washington			Registration Number, if PAC	
Street Address 8067 Harvestmoon Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05 21 19	Amount 200
City Reynoldsburg	State OH <input type="checkbox"/>	Zip Code 43068	Form (Cash, Check, Etc) check	
Full Name of Contributor Amy Elliott			Registration Number, if PAC	
Street Address 7908 Prairievew Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 05 21 19	Amount 100
City Columbus	State OH <input type="checkbox"/>	Zip Code 43235	Form (Cash, Check, Etc) check	

\* 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 \$ 1,050