

Event Date 0 2219 Page

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

Form 31-E

			'e Grean Social	R.C. 3517.10(B)			
Full Name of Committee							
Citizens For Robinette							
Full Name of Contributor			Registration Number, if PAC				
Sean O' Hanjan							
Street Address	Employer/Occupati	ion/Labor Organization*	Date (MM/DD/YYYY)	Amount			
1381 Iranwood Dr			09/22/19	\$7000			
City	State	Zip Code	Form (Cash, Check, Etc				
Grove City	OHL	43123	cash				
Full Name of Contributor	•		Registration Number, if PAC				
Janathan Burch							
Street Address	Employer/Occupati	ion/Labor Organization*	Date (MM/DD/YYYY)	Amount co			
1618 Pinnacle ClubTX			09/22/19	\$100			
City	State	Zip Code	Form (Cash, Check, Etc				
Grove City	0M-7	43123	Check				
Full Name of Contributor			Registration Number, if PAC				
Scott Moling							
Street Address	Employer/Occupati	on/Labor Organization*	Date (MM/DD/YYYY)	Amount			
3404 Parkbrook Dr			69/22/19	\$100			
City	State	Zip Code	Form (Cash, Check, Etc				
Grove aty	OH 🗖	43123	Check				
Full Name of Contributor			Registration Number, if PAC				
Daphne Hawk							
Street Address	Employer/Occupati	on/Labor Organization*	Date (MM/DD/YYYY)	Amount CO			
2374 White Ra			09/22/19	\$50			
City	State	Zip Code	Form (Cash, Check, Etc				
Grove Uty	OH	43123	check				
Full Name of Contributor			Registration Number, if PAC				
Henra & Richard Hutch	inss						
Street Address	Employer/Occupati	on/Labor Organization*	Date (MM/DD/YYYY)	Amount			
1973 Tournament Way			09/22/19	\$ 50			
City	State	Zip Code	Form (Cash, Check, Etc				
Grove Cuty	OH L	43123	Check				
* Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the							

* 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	Expen	ditures	This	Event