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

Form 31-F

R C 3517 10/B

					R.C. 3517.10(B)
Full Name of Committee					
Houk For Council					
Full Name of Contributor			Registration Number, if PAC		
Alyson N. Varda					
Street Address	Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
3696 Natalie Drive				09/28/17	50.00
City	8	State	Zip Code	Form (Cash, Check, Etc	
Grove City	C	ЭН	43123	Check	
Full Name of Contributor			<del> </del>	Registration Number, if PAC	n tr
Kimberly H. McCutchen					103 444
Street Address	Employer/Occupation/Labor Organ		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
-3928 London Lancaster Road				09/28/17	75.00
City		State	Zip Code	Form (Cash, Check, Etc	
Grove City		DН	43123	Check	
Full Name of Contributor				Registration Number, if PAC	
Caroline Cassady Shroyer					
Street Address	Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
4577 Grove City Road	<u> </u>			09/28/17	50.00
City		State	Zip Code	Form (Cash, Check, Etc	i i
Grove City	(	ЭН	43123	Check	
Full Name of Contributor			Registration Number, if PAC		
Maureen E. Cahill					va ess
Street Address	Employer	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
2470 Merrybell Ct	•			09/28/17	50.00
City	1	State	Zip Code	Form (Cash, Check, Etc	
Grove City		ЭН	43123	Check	
Full Name of Contributor				Registration Number, if PAC	
Therese Gillespie					Mary and a
Street Address Employer/Occupation/Lab		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount	
4139 Joyce Rd				09/28/17	50.00
City	1	State	Zip Code	Form (Cash, Check, Etc	
Grove City		ОН	43123	Check	
* Required for contributions from individuals over \$100	to statewid	e and Ge	eneral Assembly candida	ites. If contributor is self-employe	d the occupation and the

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
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Total Expenditures This Event

Page Total \$ 275.00

FREQUITED for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, the occupation and the iname 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)]