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Event Date	08/16/2019	Page	<u>30</u>
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## Statement of Contributions Received at a Social or Fund-Raising Event

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

Full Name of Committee					
Friends of Merisa Bowers					
Full Name of Contributor				Designation Must be # DAG	
Marc Gofstein				Registration Number, if PAC	
Street Address	Employe	r/Occupa	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
1265 Haddon Road	1			07/10/2019	250.00
City		State	Zip Code	Form (Cash, Check, Etc	and the second second second second
Columbus		ОН	43209	PayPal	
Full Name of Contributor	<del></del>	·		Registration Number, if PAC	Production of the Association of
Michael Smithson					
Street Address	Employe	r/Occupa	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
963 N. 6th St.			08/01/2019	50.00	
City	<u> </u>	State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43201	PayPai	
Full Name of Contributor		Registration Number, if PAC	antener i describi de estre estre lem Se aldalardare estre en el primer al diminio.		
Marquise Lovejoy					
Street Address	Employe	r/Occupa	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
2650 Steiner House				07/19/2019	100.00
City	1	State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43219	cash	
Full Name of Contributor		Registration Number, if PAC			
Robert Poldogar					
Street Address Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount		
376 E. Deshler Ave			į	08/16/2019	250.00
City		State	Zip Code	Form (Cash, Check, Etc	Agentines and a substitution of the substituti
Columbus		ОН	43206	check	
Full Name of Contributor			<u> </u>	Registration Number, if PAC	
Street Address	Employer	r/Occupat	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
City	7	State	Zip Code	Form (Cash, Check, Etc	
		ОН		!	
* Required for contributions from individuals over \$100	to atalawid	lo and Ca	moral Assamble condidat	to a life contribute of a colif constitute	4 44

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
1651.00		

	Total	Expenditures	This	Event
1				

Page	Total	<b>\$</b> 650.00
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<sup>\*</sup> 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)]