



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

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

Full Name of Committee Mike Coolman for City Council				
Full Name of Contributor Kyle Coolman			Registration Number, if PAC	
Street Address 204 St. Jacques		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10-29-17
				Amount \$ 50.00
City Worthington		State OH	Zip Code 43085	Form (Cash, Check, Etc) Cash
Full Name of Contributor Zella Swindall			Registration Number, if PAC	
Street Address 2286 Williams Rd.		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10-29-17
				Amount \$125.00
City Columbus		State OH	Zip Code 43207	Form (Cash, Check, Etc) Cash
Full Name of Contributor Larry Daniels			Registration Number, if PAC	
Street Address 7388 Birdie Ln.		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10-29-17
				Amount \$ 40.00
City Canal Winchester		State OH	Zip Code 43110	Form (Cash, Check, Etc) Cash
Full Name of Contributor Sean & Roseanne Cleary			Registration Number, if PAC	
Street Address 206 E. Hocking St.		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10-29-17
				Amount \$ 40.00
City Canal Winchester		State OH	Zip Code 43110	Form (Cash, Check, Etc) Check
Full Name of Contributor Patricia Dewitt			Registration Number, if PAC	
Street Address 244 Old Coach		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 10-29-17
				Amount \$25.00
City Canal Winchester		State OH	Zip Code 43110	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
\$1160.00

Total Expenditures This Event
\$250.00

Page Total \$ 280.00