31-E
R.C. 3517.10(B)

Event Date 9/28/2017
Page # 1

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

Prescribed by Secretary of State 03/05

Name of Committee in Full
Heckman for Westerville

Full Name of Contributor			Registration Number, if PAC	
Contributors of $25 or less			NA	
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**
NA	NA		09 28 17	$55.00
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	
NA	OH	NA	Cash	

Full Name of Contributor			Registration Number, if PAC	
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	
	OH			

Full Name of Contributor			Registration Number, if PAC	
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	
	OH			

Full Name of Contributor			Registration Number, if PAC	
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	
	OH			

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Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	
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Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	
	OH			

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Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**
City	**State**	**Zip Code**	**Form (Cash, Check, etc.)**	
	OH			

* 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: $55.00

Total expenditures this event: $0.00

Page Total $ $55.00