

Event Date 04-30 - 19 Page 2

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

Form 31-E

R.C. 3517.10(B

	<u></u>		R.C. 3517.10(B)
Full Name of Committee			
COMMITTEE TO EFECT VARVIS AS MAYOR			
Full Name of Contributor		Registration Number, if PAC	
Michael L. SAChs			
Street Address ///	Employer/Occupation/Labor Organization*	Date (MM/DD/Y/YYY)	Amount
200 E. Hocking St.	Ketired	04/30/19	20.00
CANAL WINCHESTER	State Zip Code 43/10	Form (Cash/Check, Etc	
Full Name of Contributor SUARON K. Whiten		Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY)	Amount
5298 Solomon HVE.	Keliped	04/30/19	25.00
City	State Zip Code	Form (Cash, Check, Etc	San
GROVEPORT	OH 43125	Check	
Full Name of Contributor HNN D. BENNETT		Registration Number, if PAC	
Street Address HI Elizabeth St.	Employer/Occupation/Labor Organization*	04/30/19	Amount / 00.00
CANAL WINCHESTER	State Zip Code 43110	Form Cash, Check, Etc	
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·	Registration Number, if PAC	
JOHN E. DOLAN			
Street Address 44 E. Mound St.	Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) 04/30/19	40.00
CANAL WINCHESTER	State Zip Code 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Form (Cash, Check, Etc	
Full Name of Contributor Dolores J. DAHON		Registration Number, if PAC	
363 W. WATER 100 St.	Employer/Occupation/Labor Organization*	Date (MM/DD/YYY) 04/30//9	20.00
CANAl WINCHESTER	OH Zip Code 43110	Form (Cash, Check, Etc	
* Required for contributions from individuals over \$100	to statewide and Consul Associative	A 16	

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 No. 31-E" and list the date of the event in the date column

Total Contributions This Event

Total Expenditures This Event

Page Total \$ 205

^{*} 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)]