

						2
Ev	ent Date	11	0/04/20	17	Page	
					-	

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

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

Full Name of Committee					
Citizens for Stephen Renner					
Full Name of Contributor	Registration Number, if PAC				
Merisa Bower		:			
Street Address	Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
363 Higley Court				10/04/2017	50.00
City		State	Zip Code	Form (Cash, Check, Etc	
Gahanna	C	ЭН	43230	Check	
Full Name of Contributor			 	Registration Number, if PAC	
Robert F & Claudia Khourney-Bowers, PhD					
Street Address	Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
714 Hunters Glen Drive	1			10/04/2017	50.00
City	[5	State	Zip Code	Form (Cash, Check, Etc	
Gahanna	C	ЭН	43230	Check	
Full Name of Contributor			<u> </u>	Registration Number, if PAC	
Timothy Pack					
Street Address	Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
1019 Ridge Crest Drive				10/04/2017	50.00
City		State	Zip Code	Form (Cash, Check, Etc	
Gahanna	C	ЭН	43230	Check	
Full Name of Contributor	***********			Registration Number, if PAC	
Dirk M & Diane C Cantrell					
Street Address	Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
948 Pinewood Drive	j		İ	10/04/2017	25.00
City		State	Zip Code	Form (Cash, Check, Etc	
Gahanna	ď	OH	43230	Check	
Full Name of Contributor	Registration Number, if PAC				
Christi & Kurt Keener					
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
350 Marjoram Drive				10/04/2017	25.00
City		State	Zip Code	Form (Cash, Check, Etc	mate :
Gahanna		ОН	43230	Check	
* Required for contributions from individuals over \$100	to statewid	o and Go	noral Accombly candida	tes. 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

event in the date column		
Total Contributions This Event	Total Expenditures This Event	
		Page Total \$
		<u> </u>

^{*} 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)]