

Event Date	Page

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

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

Full Name of Contributor			Registration Number, if PAC	
Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
elected official			9/10/17	250.00
	State	Zip Code	Form (Cash, Check, Etc	
	ОН	43123	check	de la Parisione
	·	,	Registration Number, if PAC	
Cols Building and Construction Trades Council - Dorsey Hager				
Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
Labor			9/6/17	100.00
	State	Zip Code	Form (Cash, Check, Etc	
	ОН	43212	check	
ull Name of Contributor			Registration Number, if PAC	
Employe	er/Occupat	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
self-employed			9/25/17	100
	State	Zip Code	Form (Cash, Check, Etc	
	ОН	43227	check	
Full Name of Contributor		Registration Number, if PAC		
Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
	State	Zip Code	Form (Cash, Check, Etc	
				references
Full Name of Contributor		Registration Number, if PAC		
Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
	State	Zip Code	Form (Cash, Check, Etc	A Secretary
	electe ncil - Do Employe Labor Employe self-er	elected official State OH Color Col	elected official State Zip Code OH 43123 Incil - Dorsey Hager Employer/Occupation/Labor Organization* Labor State Zip Code OH 43212 Employer/Occupation/Labor Organization* self-employed State Zip Code OH 43227 Employer/Occupation/Labor Organization* State Zip Code OH 23227 Employer/Occupation/Labor Organization* Employer/Occupation/Labor Organization*	Employer/Occupation/Labor Organization* plate (MM/DD/YYYY) elected official 9/10/17 State

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
Total Contributions This Event

Total Expenditures This Event 866-77

Page Total \$ 450.00

^{*} 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)]