



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

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

Full Name of Committee Friends of McGivern				
Full Name of Contributor Clyde R. Seidle Jr.			Registration Number, if PAC	
Street Address 4733 Clubpark Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 08/30/2017	Amount \$100.00
City Hilliard	State OH	Zip Code 43026	Form (Cash, Check, Etc) Check	
Full Name of Contributor Joseph M. Smiley			Registration Number, if PAC	
Street Address 8084 Winter Hill Court	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 08/30/2017	Amount \$200.00
City Westerville	State OH	Zip Code 43081	Form (Cash, Check, Etc) Check	
Full Name of Contributor Daniel B. Smith			Registration Number, if PAC	
Street Address 203 S. Stanwood Road	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 08/30/2017	Amount \$100.00
City Bexley	State OH	Zip Code 43209	Form (Cash, Check, Etc) Check	
Full Name of Contributor Smith & Hale LLC			Registration Number, if PAC	
Street Address 37 West Broad Street	Employer/Occupation/Labor Organization* Glenn A. Dugger		Date (MM/DD/YYYY) 08/30/2017	Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, Etc) Check	
Full Name of Contributor Joseph E. Sullivan			Registration Number, if PAC	
Street Address 7539 Bardston Drive	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 08/30/2017	Amount \$100.00
City Dublin	State OH	Zip Code 43017	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
\$2,900.00

Total Expenditures This Event

Page Total \$ 600.00