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Event Date	 10/24	1/2019	Pag	<u>' </u>

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

Form 31-E

					R.C. 3317.10(B)	
Full Name of Committee						
Jadwin for Gahanna						
Full Name of Contributor		<u> </u>		Registration Number, if PAC		
Thomas Wester						
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount	
888 Ludwig Dr.				10/24/2019	100.00	
City	1	State	Zip Code	Form (Cash, Check, Etc		
Gahanna	Sahanna OH 432		43230	check		
Full Name of Contributor				Registration Number, if PAC		
Patricia Schlake						
Street Address	Employer	/Occupat	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount	
1125 Sanctuary Place	25 Sanctuary Place		10/24/2019	500.00		
City	1	State	Zip Code	Form (Cash, Check, Etc		
Gahanna	1	ОН	43230	check		
Full Name of Contributor			'	Registration Number, if PAC		
J. Wesley Hall						
Street Address Employer/Occupation/Labor Organization*			Date (MM/DD/YYYY)	Amount		
2235 Orange Lake Drive	35 Orange Lake Drive		10/24/2019	500.00		
City		State Zip Code		Form (Cash, Check, Etc		
Lewis Center		ОН	43035	check		
Full Name of Contributor				Registration Number, if PAC		
Steven Davidson						
Street Address Employer/Occupation/Labor Organiz		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount		
13267 East Letts Lane				10/24/2019	250.00	
City		State	Zip Code	Form (Cash, Check, Etc		
Carmel	[1	IN	46074	check		
Full Name of Contributor				Registration Number, if PAC		
Larry Champlin						
Street Address Employ		er/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount	
675 Parkedge Dr.				10/24/2019	100.00	
City		State	Zip Code	Form (Cash, Check, Etc		
Gahanna		ОН	43230	check		
* Required for contributions from individuals over \$100	to statewid	le and Ge	aneral Assembly 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 No. 31-E" and list the date of the event in the date column

Total Contributions	This	Event

Total	Expenditures	This	Event
ì			

Page Total \$ 1450.00

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)]