

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

Form 31-E

			Pinnanie E	vent	R.C. 3517.10(B)
Full Name of Committee		•		•	
Citizens For Robin	eHe				
Full Name of Contributor			Registration Numb	er, if PAC	
Alex Varney					
Street Address	Employer/Occupa	tion/Labor Organization	Date (MM/DD/YYY	Υ) .	Amount
2722 Parlin Drive			08/08/1	9	\$2000
City	State	Zip Code	Form (Cash, Chec	F	
Grove City	OHL	43123	cash		
Full Name of Contributor		······································	Registration Numb	er, if PAC	HAND CONTRACTOR OF THE PROPERTY OF THE PROPERT
Jim Hale				, 1	
Street Address	Employer/Occupa	tion/Labor Organization	Date (MM/DD/YYY	Y) /	Amount CO
4215 Arbytus Ave	<u> </u>		08/08/1	19	\$10000
City	State	Zip Code	Form (Cash, Chec	17.	
Grove City	OHL	43123	check		4.0
Full Name of Contributor			Registration Numb	er, if PAC	THE RESERVE WHEN THE PROPERTY OF THE PROPERTY OF
Sharon Reichard					
Street Address	Employer/Occupa	tion/Labor Organizatio	Date (MM/DD/YYY	Υ)	Amount
2427 Marthas Wood			08/08/19	۱ ۴	\$200
City	State	Zip Code	Form (Cash, Chec	k, Etc	
Grove City	OHL	43123	cash		
Full Name of Contributor	***		Registration Numb	er, if PAC	·
Richard & Nancie Becht	rel				
Street Address	Employer/Occupa	tion/Labor Organizatio	Date (MM/DD/YYY	۸) ر	Amount
11880 Elgin Dr			08/08/1	9	\$10000
City	State	Zip Code	Form (Cash, Chec	k, Etc	
Orient		43146	Check		
Full Name of Contributor			Registration Numb	er, if PAC	
Bonnie Brizendine	٠.				
Street Address	Employer/Occupa	tion/Labor Organizatio	Date (MM/DD/YY)	Υ)	Amount cu_
1180 Pinnade Club Dr			08/08/1		\$200
City	State	Zip Code	Form (Cash, Chec	· ·	
Grove City	OH	43123	check		
<ul> <li>Required for contributions from individuals over \$100 name of the individual's business, if any rather than em</li> </ul>					

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 Ev	ent
]	

aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]