

Event Date	8/26/19	Page 2

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

Form 31-E R C. 3517 10(B)

ull Name of Committee							
aphne Moehring for Gahanna School E	Board				N. N. W. W. M. DAC		
Full Name of Contributor					Registration Number, if PAC		
laria Becker							
reet Address	Employer/Occupation/Labor Organization*			n/Labor Organization*	Date (MM/DD/YYYY)	Amount	
059 Challis Springs Dr					08/26/19	50.00	
ity		Stat	e 2	ip Code	Form (Cash, Check, Etc		
		ОН		43054	Check		
lew Albany					Registration Number, if PAC		
ull Name of Contributor							
R Radd	1=	nnlovor(Oc	vunati	on/Labor Organization*	Date (MM/DD/YYYY)	Amount	
street Address	Employer		er/Occupation/Labor Organization*		08/26/19	50.00	
1075 Arcado Ct		- 12:		7in Cada	Form (Cash, Check, Etc		
City		Sta	- 1	Zip Code 43230	Check		
Gahanna			OH 4	43230			
Full Name of Contributor					Registration Number, if PAC		
Donna Simmons							
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount			
1341 Haybrook Dr					08/26/1	9 100.00	
City		St	ate	Zip Code	Form (Cash, Check, Etc		
Gahanna Gahanna		0	Н	43230	Check		
					Registration Number, if PAC		
Full Name of Contributor							
Suzanne Hom	TE-man		oyer/Occupation/Labor Organization		n* Date (MM/DD/YYYY)	Amount	
Street Address]	Employen	оосерс		08/26/	19 100.00	
625 Laurel Ridge Dr	l		4 - 4 -	Zip Code	Form (Cash, Check, Etc		
City		į.	tate	43230	Check		
Gahanna)H	43230	Registration Number, if PAC		
Full Name of Contributor					Kedieranou Muniper, II FA	•	
Mary Lightbody						Amount	
Street Address		Employer	/Occup	ation/Labor Organization	on* Date (MM/DD/YYYY)	Amount 719 100.00	
4948 East Walnut Street					8/26	19 100.00	
			State	Zip Code	Form (Cash, Check, Etc		
City Westerville			он	43081	Check		

ill 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 \$1285 Total Expenditures This Event
0

Page Total \$	
Page Total #	=

^{*} 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)]