OFFICE OF THE
Ohio Secretary of State

Event Date November 12, 2019 Page 4

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

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

Full Name of Committee
Spalding for New Albany

Full Name of Contributor				Registration Number, if PAC	
David Demers					
Street Address	**Employer/Occupation/Labor Organization***			**Date (MM/DD/YYYY)**	**Amount**
7771 CROMWELL END	Attorney - Cooke Demers LLC			11/12/2019	$500.00
City	**State**	**Zip Code**		**Form (Cash, Check, Etc**	
New Albany	OH	43054		Check	
Full Name of Contributor				**Registration Number, if PAC**	
Karen and Irv Dennis					
Street Address	**Employer/Occupation/Labor Organization***			**Date (MM/DD/YYYY)**	**Amount**
3856 LAMBTON PL	U.S. Housing and Urban Dev			11/12/2019	$150.00
City	**State**	**Zip Code**		**Form (Cash, Check, Etc**	
New Albany	OH	43054		check	
Full Name of Contributor				**Registration Number, if PAC**	
Phillip Derrow					
Street Address	**Employer/Occupation/Labor Organization***			**Date (MM/DD/YYYY)**	**Amount**
7 Hawksmoor Rd	Ohio Transmission Corp			11/12/2019	$500.00
City	**State**	**Zip Code**		**Form (Cash, Check, Etc**	
New Albany	OH	43054		check	
Full Name of Contributor				**Registration Number, if PAC**	
Dr Donald and Lori Deshetler					
Street Address	**Employer/Occupation/Labor Organization***			**Date (MM/DD/YYYY)**	**Amount**
5071 TURNER CLOSE	Ohio State University			11/12/2019	50.00
City	**State**	**Zip Code**		**Form (Cash, Check, Etc**	
New Albany	OH	43054		check	
Full Name of Contributor				**Registration Number, if PAC**	
Jamie Dulick					
Street Address	**Employer/Occupation/Labor Organization***			**Date (MM/DD/YYYY)**	**Amount**
11 Highgrove	In Ocean Group LLC			11/12/2019	$500.00
City	**State**	**Zip Code**		**Form (Cash, Check, Etc**	
New Albany	OH	43054		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	Total Expenditures This Event	Page Total $ 1700.00