



**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 Louis Salvati					Registration Number, if PAC	
Full Name of Contributor Doug Gordon					Registration Number, if PAC	
Street Address 733 Moreno ct		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 02/28/2019	Amount \$ 25.00	
City Reynoldsburg		State OH	Zip Code 43068	Form (Cash, Check, Etc) check		
Full Name of Contributor Joe Begany					Registration Number, if PAC	
Street Address 8840 Kingsley Dr		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 02/28/2019	Amount \$ 25.00	
City Reynoldsburg		State OH	Zip Code 43068	Form (Cash, Check, Etc) check		
Full Name of Contributor Chris Shook					Registration Number, if PAC	
Street Address 572 Hunnicut Dr		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 02/28/2019	Amount \$ 100.00	
City Reynoldsburg		State OH	Zip Code 43068	Form (Cash, Check, Etc) check		
Full Name of Contributor Stacie Baker					Registration Number, if PAC	
Street Address 1101 Bergenia Dr		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 02/28/2019	Amount \$ 50.00	
City Reynoldsburg		State OH	Zip Code 43068	Form (Cash, Check, Etc)		
Full Name of Contributor Jason Gibson					Registration Number, if PAC	
Street Address 8165 Priestley Dr		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 02/28/2019	Amount \$ 25.00	
City Reynoldsburg		State OH	Zip Code 43068	Form (Cash, Check, Etc) cash		

* 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 \$ **225.00**