

| Event Date | 1 | 0/04/20 | 17 | Page_ | 1 |
|------------|---|---------|----|-------|---|

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

Form 31-E

| | | | | | R.C. 3517.10(B | |
|--|---|---|--------------------------|-----------------------------|---|--|
| Full Name of Committee | | | | | | |
| Citizens for Stephen Renner | | | | | | |
| Full Name of Contributor | | | | Registration Number, if PAC | | |
| Sheryl Williams | | | | | | |
| Street Address Em | | Employer/Occupation/Labor Organization* | | Date (MM/DD/YYYY) | Amount | |
| 203 Litner Street | | | 10/04/2017 | 100.00 | | |
| City | | State | Zip Code | Form (Cash, Check, Etc | ind. | |
| Gahanna | | ОН | 43230 | Check | | |
| Full Name of Contributor | Registration Number, if PAC | | | | | |
| Alfred E & Janet R Navarro | | | | | | |
| Street Address Em | | mployer/Occupation/Labor Organization* | | Date (MM/DD/YYYY) | Amount | |
| PO Box 539 | | | | 10/04/2017 | 100.00 | |
| City | | State | Zip Code | Form (Cash, Check, Etc | | |
| New Albany | | ОН | 43054 | Check | er in the same of the | |
| Full Name of Contributor | Registration Number, if PAC | | | | | |
| Michael S & Jodelle J Carder | | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | Date (MM/DD/YYYY) | Amount | | |
| 1312 Windtree Court | | | | 10/04/2017 100.00 | | |
| City | Ţ; | State | Zip Code | Form (Cash, Check, Etc | er også i statere er en | |
| New Albany | | ОН 43054 | | Check | | |
| Full Name of Contributor | Registration Number, if PAC | | | | | |
| Dr J.R. Radd | | | | | | |
| Street Address | reet Address Employer/Occupation/Labor Organization | | tion/Labor Organization* | Date (MM/DD/YYYY) | Amount | |
| 1075 Arcaro Court | | | 10/04/2017 | 50.00 | | |
| City | : | State | Zip Code | Form (Cash, Check, Etc | | |
| Gahanna | | ОН | 43230 | Check | | |
| Full Name of Contributor | Registration Number, if PAC | | | | | |
| Richard C Sahli | | | | | | |
| Street Address Employer/Occupation/Labor Organ | | tion/Labor Organization* | Date (MM/DD/YYYY) | Amount | | |
| 981 Pinewood Lane | | 10/04/2017 | 50.00 | | | |
| ity State Zip Code | | Zip Code | Form (Cash, Check, Etc | | | |
| Gahanna | | ОН | 43230 | Check | | |

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 \$ |
| | , | |

^{*} 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)]