



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

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

Full Name of Committee <u>Schottke for GC</u>				
Full Name of Contributor <u>James Rauck</u>			Registration Number, if PAC	
Street Address <u>1111 London-Groveport Rd.</u>		Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) <u>06/30/2018</u>	Amount <u>100.00</u>
City <u>Grove City</u>		State OH <input type="checkbox"/>	Zip Code <u>43123</u>	Form (Cash, Check, Etc) <u>Check</u>
Full Name of Contributor <u>Patrick J. Kelley</u>			Registration Number, if PAC	
Street Address <u>2712 Bexley Park Rd.</u>		Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) <u>06/30/2018</u>	Amount <u>100.00</u>
City <u>Columbus</u>		State OH <input type="checkbox"/>	Zip Code <u>43209</u>	Form (Cash, Check, Etc) <u>Check</u>
Full Name of Contributor <u>Chris Roach</u>			Registration Number, if PAC	
Street Address <u>3980 Broadway</u>		Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) <u>06/30/2018</u>	Amount <u>50.00</u>
City <u>Grove City</u>		State OH <input type="checkbox"/>	Zip Code <u>43123</u>	Form (Cash, Check, Etc) <u>check</u>
Full Name of Contributor <u>Conner Brintlinger</u>			Registration Number, if PAC	
Street Address <u>1360 Presentia Dr.</u>		Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) <u>06/30/2018</u>	Amount <u>20.00</u>
City <u>Columbus</u>		State OH <input type="checkbox"/>	Zip Code <u>43212</u>	Form (Cash, Check, Etc) <u>check</u>
Full Name of Contributor <u>Mark Fuller</u>			Registration Number, if PAC	
Street Address <u>1422 Cascade Dr.</u>		Employer/Occupation/Labor Organization*	Date (MM/DD/YYYY) <u>06/30/2018</u>	Amount <u>50.00</u>
City <u>Grove City</u>		State OH <input type="checkbox"/>	Zip Code <u>43123</u>	Form (Cash, Check, Etc) <u>Check</u>

* 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
2385.00

Total Expenditures This Event
232.86

Page Total \$ 320.00