31-E R.C. 3517.10(B)

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

Event	Date	07/31/2012
Page	4	7.31 Mezzo

Prescribed by Secretary of State 3/05

Street Address	Name of Committee in Full Paula Brooks Committee								
Employer/Occupation/Labor Organization*	Full Name of Contributor					Registration Number, if PAC			
57 Riverview Park Dr         State         Zip Code         Form (Cash, Check, etc. Check           City         State         Zip Code         Form (Cash, Check, etc. Check           Full Name of Contributor         Registrion Number, if           Kris M Dawley         Street Address         Employer/Occupation/Labor Organization*         M         D         Y           2581 Brentwood Rd         State         Zip Code         Form (Cash, Check, etc. Check         Check         Check           Coty         State         Zip Code         Form (Cash, Check, etc. Check	Гу D Marsh								
State   Zip Code   Check   etc.   Columbus   Check   etc.   Columbus   Check   etc.   Columbus   Check   etc.   Columbus   Check   etc.	Street Address	Employer/C	Occupation/Labor Organization*	M	D	Y	Amount		
Columbus         OH         43214-2022         Form (Cast), Check, etc. Check           Full Name of Contributor         Registration Number, if Registration Number, if Registration Number, if Registration Number, if Ports (Cast), Check, etc. Check           Street Address         Employer/Occupation/Labor Organization*         M         D         Y           Columbus         State         Zip Code         Form (Cash, Check, etc. Check           Full Name of Contributor         Registration Number, if           Richard William Holz         Street Address         Employer/Occupation/Labor Organization*         M         D         Y           1660 Gables Ct         0H         43235-1121         Form (Cash, Check, etc. Check         Check           Columbus         OH         43235-1121         Check         Registration Number, if           Full Name of Contributor         Employer/Occupation/Labor Organization*         M         D         Y           Michaelle Dubrow         State         Zip Code         Form (Cash, Check, etc. Check         Check           City         State         Zip Code         Form (Cash, Check, etc. Check         Check           Columbus         OH         43215-5907         Form (Cash, Check, etc. Check, etc. Check         Check           Full Name of Contributor	57 Riverview Park Dr			07	31	12	\$250.0		
Full Name of Contributor  Kris M Dawley  Street Address  Employer/Occupation/Labor Organization*  M D Y 2581 Brentwood Rd  City  State Zip Code Columbus  OH 43215  Form (Cash, Check, etc. Check  Full Name of Contributor Richard William Holz  Street Address  Employer/Occupation/Labor Organization*  M D Y 67 31 12  Employer/Occupation/Labor Organization*  M D Y 67 31 12  Employer/Occupation/Labor Organization*  Registration Number, if Form (Cash, Check, etc. Check  Check  Full Name of Contributor Registration Number, if Full Name of Contributor OH 43235-1121  Form (Cash, Check, etc. Check  Full Name of Contributor Michelle Dubrow  Street Address Employer/Occupation/Labor Organization* M D Y 1200 Laveque Tower  City Columbus  State Zip Code OH 43215-5907  Form (Cash, Check, etc. Check  Check  Full Name of Contributor Street Address OH 43215-5907  Employer/Occupation/Labor Organization* Registration Number, if Check  Full Name of Contributor Street Address Employer/Occupation/Labor Organization* Registration Number, if Check  Full Name of Contributor Street Address Employer/Occupation/Labor Organization* Registration Number, if Check  Full Name of Contributor Street Address Employer/Occupation/Labor Organization* Registration Number, if Check  Check  Full Name of Contributor Street Address Employer/Occupation/Labor Organization* Registration Number, if Check Ch	City	į.	<b>1</b> '	Form (Cash, Check, etc.)					
Kris M Dawley         Employer/Octupation/Labor Organization*         M         D         Y           2581 Brentwood Rd         State         Zip Code         Form (Cash, Cbck, ctc. Check         City         Columbus         Form (Cash, Cbck, ctc. Check         Check         Check         Check         Local Check         Check         Local	Columbus	ОН	43214-2022	Check					
Street Address         Employer/Octupation/Labor Organization*         M         D         Y           2581 Brentwood Rd         State         Zip Code         Form (Cash, Cbeck, etc. Check         City         Columbus         Form (Cash, Cbeck, etc. Check         Check         Check         Check         Local Check         Check         Local Check         Lo	Full Name of Contributor				Registration Number, if PAC				
2581 Brentwood Rd         State         Zip Code         Form ⟨Cash, Check, etc. Check           Columbus         OH         43215         Form ⟨Cash, Check, etc. Check           Full Name of Contributor Richard William Holz         Registration Number, if Proper/Occupation/Labor Organization*         M         D         Y           1660 Gables Ct         270 31 12         Total City         State         Zip Code         Form ⟨Cash, Check, etc. Check⟩         Check         Check         Total Cash, Check, etc. Check         Check         Check         Total Cash, Check, etc. Check	Kris M Dawley								
City Columbus         State OH         Zip Code 43215         Form (Cash, Check, etc. Check         Columbus         Columbus         Check         Length Address of Contributor         Registration Number, if Parameter of Contributor         Registration Number, if Parameter of Cash, Check, etc. On Paramete	Street Address	Employer/C	Occupation/Labor Organization*	М	D	Y	Amount		
Columbus         OH         43215         Check         Check states of Check           Full Name of Contributor         Employer/Occupation/Labor Organization*         Registration Number, if states and proper to the color of t	2581 Brentwood Rd			07	31	12	\$250.0		
Columbus         OH         43215         Check           Full Name of Contributor         Registration Number, if           Richard William Hotz         Street Address         Employer/Occupation/Labor Organization*         M         D         Y           1660 Gables Ct         07         31         12           City         State         Zip Code         Form (Cash, Check, etc. Check           Columbus         OH         43235-1121         Registration Number, if           Michelle Dubrow         Street Address         Employer/Occupation/Labor Organization*         M         D         Y           1200 Laveque Tower         State         Zip Code         Form (Cash, Check, etc. Check           Columbus         OH         43215-5907         Registration Number, if           Full Name of Contributor         OH         43215-5907         Registration Number, if           Susan Rector         Employer/Occupation/Labor Organization*         M         D         Y           Street Address         Employer/Occupation/Labor Organization*         M         D         Y           67 E Deshler Ave         07         31         12	City	State	Zip Code	Form	(Cash (	lheck, et	c.)		
Richard William Holz           Street Address         Employer/Occupation/Labor Organization*         M         D         Y           1660 Gables Ct         07         31         12           City         State         Zip Code         Form ⟨Cash, ⟨bcck, etc.⟩           Columbus         OH         43235-1121         Check           Full Name of Contributor         Registration Number, if           Michelle Dubrow         M         D         Y           1200 Laveque Tower         Bate         Zip Code         Form ⟨Cash, ⟨bcc, etc.⟩           City         State         Zip Code         Form ⟨Cash, ⟨bcc, etc.⟩           Columbus         OH         43215-5907         Registration Number, if           Full Name of Contributor         Registration Number, if         Check           Susan Rector         Employer/Occupation/Labor Organization*         M         D         Y           Street Address         Employer/Occupation/Labor Organization*         M         D         Y           67 E Deshler Ave         Employer/Occupation/Labor Organization*         M         D         Y	Columbus	ОН	43215						
Street Address         Employer/Occupation/Labor Organization*         M         D         Y           1660 Gables Ct         07         31         12           City         State         Zip Code         Form (Cash, Check, etc. Check           Columbus         OH         43235-1121         Registration Number, if           Michelle Dubrow         Street Address         Employer/Occupation/Labor Organization*         M         D         Y           1200 Laveque Tower         State         Zip Code         Form (Cash, Check, etc. Check         Check           Columbus         OH         43215-5907         Registration Number, if           Full Name of Contributor         Registration Number, if         Street Address         Employer/Occupation/Labor Organization*         M         D         Y           Street Address         Employer/Occupation/Labor Organization*         M         D         Y           67 E Deshler Ave         67 E Deshler Ave         07         31         12	Full Name of Contributor					Registration Number, if PAC			
1660 Gables Ct       O7 31 12         City Columbus       State OH 43235-1121       Zip Code OH 43235-1121       Form (Cash, Check, etc. Check, etc. Check         Full Name of Contributor Michelle Dubrow       Registration Number, if Michelle Dubrow       Registration Number, if Michelle Dubrow       M D Y         Street Address       Employer/Occupation/Labor Organization*       M D Y         1200 Laveque Tower       State Zip Code OH 43215-5907       Form (Cash, Check, etc. Check, etc. Check         Columbus       OH 43215-5907       Registration Number, if Michelle Dubrow         Full Name of Contributor Susan Rector       Employer/Occupation/Labor Organization*       M D Y         Street Address       Employer/Occupation/Labor Organization*       M D Y         67 E Deshler Ave       07 31 12	Richard William Holz			1					
City Columbus         State OH         Zip Code 43235-1121         Form (Cash, Check, etc. Check, etc. Check           Full Name of Contributor Michelle Dubrow         Registration Number, if with the property of the	Street Address	Employer/C	Occupation/Labor Organization*	М	D	Y	Amount		
Columbus         OH         43235-1121         Form (Easil), Check, etc.           Full Name of Contributor         Registration Number, if           Michelle Dubrow         Street Address         Employer/Occupation/Labor Organization*         M         D         Y           1200 Laveque Tower         08         02         12           City         State         Zip Code         Form (Cash, Check, etc.           Columbus         OH         43215-5907         Feet Name of Contributor           Susan Rector         Registration Number, if           Street Address         Employer/Occupation/Labor Organization*         M         D         Y           67 E Deshler Ave         07         31         12	1660 Gables Ct			07	31	12	\$250.0		
Columbus         OH         43235-1121         Check           Full Name of Contributor Michelle Dubrow         Registration Number, if Supplyer/Occupation/Labor Organization*         Registration Number, if Supplyer/Occupation/Labor Organization*         M         D         Y           1200 Laveque Tower         State         Zip Code         Form (Cash, Check, etc. Check         Check           Columbus         OH         43215-5907         Registration Number, if Susan Rector         Registration Number, if Susan Rector           Street Address         Employer/Occupation/Labor Organization*         M         D         Y           67 E Deshler Ave         07         31         12	City	State	Zip Code	Form (Cash, Check, etc.)					
Michelle Dubrow           Street Address         Employer/Occupation/Labor Organization*         M         D         Y           1200 Laveque Tower         08         02         12           City         State         Zip Code         Form (Cash, Check, etc. Check*)           Columbus         0H         43215-5907         Registration Number, if susan Rector           Susan Rector         Street Address         Employer/Occupation/Labor Organization*         M         D         Y           67 E Deshler Ave         07         31         12	Columbus	ОН	43235-1121						
Street Address         Employer/Occupation/Labor Organization*         M         D         Y           1200 Laveque Tower         08         02         12           City         State         Zip Code         Form (Cash, Check, etc. Check)           Columbus         0H         43215-5907         Registration Number, if           Susan Rector         Street Address         Employer/Occupation/Labor Organization*         M         D         Y           67 E Deshler Ave         07         31         12	Full Name of Contributor					Registration Number, if PAC			
1200 Laveque Tower       08       02       12         City Columbus       State OH       Zip Code 43215-5907       Form (Cash, Check, etc.) Check         Full Name of Contributor Susan Rector       Registration Number, if Susan Rector         Street Address       £mployer/Occupation/Labor Organization*       M       D       Y         67 E Deshler Ave       07       31       12	Michelle Dubrow			1					
City         State         Zip Code         Form (Cash, Check, etc.)           Columbus         OH         43215-5907         Check           Full Name of Contributor         Registration Number, if           Susan Rector         Street Address         Employer/Occupation/Labor Organization*         M         D         Y           67 E Deshler Ave         07         31         12	Street Address	Employer/C	Occupation/Labor Organization*	М	D	Υ	Amount		
City Columbus         State OH         Zip Code 43215-5907         Form (Cash, Check, etc. Check)         Columbus           Full Name of Contributor Susan Rector         Registration Number, if Susan Rector         Registration Number, if Susan Rector         Number of Contributor Susan Rector         Number o	1200 Laveque Tower			08	02	12	\$250.00		
Columbus         OH         43215-5907         Check           Full Name of Contributor         Susan Rector           Sureet Address         Employer/Occupation/Labor Organization*         M         D         Y           67 E Deshler Ave         07         31         12	City	State	Zip Code						
Susan Rector  Street Address Employer/Occupation/Labor Organization* M D Y 67 E Deshler Ave 07 31 12	Columbus	ОН	43215-5907						
Street Address Employer/Occupation/Labor Organization* M D Y 67 E Deshler Ave 07 31 12	full Name of Contributor				Registration Number, if PAC				
67 E Deshler Ave 07 31 12	Susan Rector			- 1					
07 31 12	Street Address	Employer/C	Occupation/Labor Organization*	М	D	Y	Amount		
	67 E Deshler Ave			07	31	12	\$250.00		
City State Zip Code Form (Cach Chook atta	City	State	Zip Code	Form (Cash, Check, etc.)					
Columbus OH 43206.2655	Columbus	он	43206-2655	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

the event in the date column	
Total contributions this event	Total expenditures this event

\$9,730.00 \$0.00 Page Total S 1,250.00

<sup>\*</sup> 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 appear. [R.C. 3517.10(B)(4)]