31-A R.C. 3517.10

Page	2

## **Statement of Contributions Received**

Prescribed by Secretary of State 2/01

	Name of Committee in Full											
Derek Hert    State   Employer/Occupation/Labor Organization   Form (Clash, Check, etc.)   Check   C	Friends For Porter Committee											
		e of Contributor					Registration Number, if PAC					
A 607 Wuertz Ct												
State		Employer/Occupation/Labor Organization							I			
Dublin	4607 Wuertz Ct	OSU							Check			
Form (Cash, Check, etc.)   Form (Cash, Check, etc.)   Form (Cash, Check, etc.)	1 ·	1 .		1 -	1 . I . I .			Amount				
Rose T Craig Surcet Address		l O	П	43016					1			
Street Address   Employer/Occupation/Labor Organization   Form (Cash, Check, etc.)												
Algorithms		. 1.6										
State   Zip Code   M   A3123   M   D   Y   Amount   100.00		1 ' '	_ ' ' ' '						1			
Grove City					1							
Full Name of Contributor Total Contributions From Form 31-E  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  State   Zip Code   M   D   Y   Amount   O   2   1   1   0   5   O   2   1   1   0   5   O   2   1   1   0   5   O   2   1   1   0   5   O   2   1   1   0   5   O   2   1   1   0   5   O   2   1   1   0   5   O   2   1   1   0   5   O   3   2   4   0   5   O   3   2   4   0   5   O   3   2   4   0   5   O   3   2   4   0   5   O   4   0   7   0   5   O   5   0   O   6   0   0   O   6   0   O   7   0   5   O   7		1		i .			_		Amount	100.00		
Total Contributions From Form 31-E  Street Address  Employer/Occupation/Labor Organization  State Zip Code M D D Y Amount O D D STATE OF TOTAL CONTRIBUTIONS FROM TOTAL CON		10	11	43123						100.00		
Street Address   Employer/Occupation/Labor Organization   Form (Cash, Check, etc.)					Registr	ation N	um	ber, 11 PA	i.C			
State   Zip Code   M		Employe	*/Oanuna	tion/Labor Organization					Form (Cosh C	haale ata )		
Full Name of Contributor Total Contributions From Form 31-E  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  State Zip Code M D Y Amount Old	Street Address	Employe	i/Occupa	tion/Labor Organization					Form (Cash, C	neck, etc.)		
Full Name of Contributor Total Contributions From Form 31-E  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  State Zip Code M D Y Amount Old	City	Str	ate.	7in Code	I M	T n		Ιv	Amount			
Full Name of Contributor Total Contributions From Form 31-E  Street Address  Employer/Occupation/Labor Organization  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Registration Number, if PAC	City	1		Zip Code					Allouit	2 715 00		
Total Contributions From Form 31-E  Street Address  Employer/Occupation/Labor Organization  State Zip Code M D Y Amount O 3 2 4 0 5 3,180.00  Full Name of Contributor Total Contributions From Form 31-E  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  State Zip Code M D Y Amount O 4 0 7 0 5 900.00  Full Name of Contributor  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization  Registration Number, if PAC	Full Name of Contributor									2,715.00		
Employer/Occupation/Labor Organization   Employer/Occupation/Labor Organization   Form (Cash, Check, etc.)												
City  State Zip Code  M D Y Amount 0 3 2 4 0 5 3,180.00  Full Name of Contributor  Total Contributions From Form 31-E  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  State Zip Code  M D Y Amount 0.00  Full Name of Contributor  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount 0.00  Full Name of Contributor  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization  Registration Number, if PAC  Registration Number, if PAC						Form (Cash Chark ata)						
Full Name of Contributor Total Contributions From Form 31-E  Street Address  Employer/Occupation/Labor Organization  Employer/Occupation/Labor Organization  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Registration Number, if PAC	Succe Address	Employe	1/ Оссира	Cloud Dubble Organization					Tomi (Casil, C	neek, etc.)		
Full Name of Contributor Total Contributions From Form 31-E  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  State Zip Code M D Y Amount O   4 0   7 0   5 900.00  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Registration Number, if PAC	City	Stota		Zin Code	Ιм	I D		l v	Amount			
Full Name of Contributor  Total Contributions From Form 31-E  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  State Zip Code M D Y Amount O 4 0 7 0 5 900.00  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  Registration Number, if PAC		"		Dip code			1		moun	3 180 00		
Street Address   Employer/Occupation/Labor Organization   Form (Cash, Check, etc.)    City   State   Zip Code   M   D   Y   Amount   O	Full Name of Contributor	1							C	3,100.00		
Street Address								,	•			
Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  0.00  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  0.00  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  City  Registration Number, if PAC		Employe					Form (Cash, Check, etc.)					
Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  0.00  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  0.00  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  City  Registration Number, if PAC		' '	•									
Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  0.00  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  0.00  Form (Cash, Check, etc.)  Form (Cash, Check, etc.)  City  Registration Number, if PAC	City	Sta	ate	Zip Code	М	D		Y	Amount	<del></del> -		
Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  O.00  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  O.00  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  O.00  Full Name of Contributor  Registration Number, if PAC					0 4	lo I	7	0 5		900.00		
City  State Zip Code  M D Y Amount  0.00  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  City  State Zip Code  M D Y Amount  0.00  Full Name of Contributor  Registration Number, if PAC	Full Name of Contributor								C			
City  State Zip Code  M D Y Amount  0.00  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  City  State Zip Code  M D Y Amount  0.00  Full Name of Contributor  Registration Number, if PAC												
Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  0.00  Full Name of Contributor  Registration Number, if PAC	Street Address	Employe					Form (Cash, Check, etc.)					
Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  0.00  Full Name of Contributor  Registration Number, if PAC												
Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization  Form (Cash, Check, etc.)  City  State Zip Code  M D Y Amount  0.00  Full Name of Contributor  Registration Number, if PAC	City	St	ate	Zip Code	М	D		Y	Amount			
Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.)  City State Zip Code M D Y Amount  O.00  Full Name of Contributor Registration Number, if PAC						1				0.00		
City State Zip Code M D Y Amount 0.00  Full Name of Contributor Registration Number, if PAC	Full Name of Contributor Registration Numb							ber, if PA	C			
City State Zip Code M D Y Amount 0.00  Full Name of Contributor Registration Number, if PAC												
Full Name of Contributor  Registration Number, if PAC	Street Address Employer/Occupation/Labor Organization					Form (Cash, Check, etc.)						
Full Name of Contributor  Registration Number, if PAC												
Full Name of Contributor Registration Number, if PAC	City	St	ate	Zip Code	М	D		Y	Amount			
										0.00		
Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.)	Full Name of Contributor Registration Number, if PAC											
Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.)												
	treet Address Employer/Occupation/Labor Organization							Form (Cash, Check, etc.)				
City State Zip Code M D Y Amount	City	State 2		Zip Code	M	D		Y	Amount			
0.00									<u> </u>	0.00		

\* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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)

Page Total \$ 6,945.00