

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

Prescribed by Secretary of State 3/05

Event Date <u>02/20/2013</u>
Page <u>7</u> 2.20.13

Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor Sanjay Sadana			Registration Number, if PAC			
Street Address 8236 Chippenham Drive	Employer/Occupation/Labor Organization*		M 02	D 21	Y 13	Amount \$250.00
City Dublin	State OH	Zip Code 43016	Form (Cash, Check, etc.) Check			
Full Name of Contributor George J Sicaras			Registration Number, if PAC			
Street Address 2988 N High St	Employer/Occupation/Labor Organization*		M 02	D 21	Y 13	Amount \$250.00
City Columbus	State OH	Zip Code 43202-1155	Form (Cash, Check, etc.) Check			
Full Name of Contributor Bill Klausman			Registration Number, if PAC			
Street Address 75 E Gay St	Employer/Occupation/Labor Organization*		M 02	D 21	Y 13	Amount \$250.00
City Columbus	State OH	Zip Code 43215-3126	Form (Cash, Check, etc.) Check			
Full Name of Contributor Robert D. Weisman			Registration Number, if PAC			
Street Address 7277 Penneyroyal Pl	Employer/Occupation/Labor Organization*		M 02	D 07	Y 13	Amount \$250.00
City Dublin	State OH	Zip Code 43017-2171	Form (Cash, Check, etc.) Check			
Full Name of Contributor Robert A Schuerger			Registration Number, if PAC			
Street Address 512 City Park Avenue	Employer/Occupation/Labor Organization*		M 02	D 21	Y 13	Amount \$300.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check			

* 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)]

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.

\$13,905.00

\$890.95

Page Total \$ 1,300.00