

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

Prescribed by Secretary of State 03/05

|   |   |                          |                                       |                           |
|---|---|--------------------------|---------------------------------------|---------------------------|
| Name of Committee in Full<br><b>Wolfe For Mayor Committee</b> |   |                          |                                       |                           |
| Full Name of Contributor<br><b>Beer Dock East</b>             |   |                          | Registration Number, if PAC           |                           |
| Street Address<br><b>125 ROBINWOOD Ave</b>                    | Employer/Occupation/Labor Organization* |                          | M D Y<br><b>0 5 1 4 0 9</b>           | Amount<br><b>\$100.00</b> |
| City<br><b>Whitehall</b>                                      | State<br><b>OH</b>                      | Zip Code<br><b>43213</b> | Form (Cash, Check, etc.)<br><b>ca</b> |                           |
| Full Name of Contributor<br><b>Mike Sweeney</b>               |   |                          | Registration Number, if PAC           |                           |
| Street Address<br><b>300 S Harding</b>                        | Employer/Occupation/Labor Organization* |                          | M D Y<br><b>0 5 1 4 0 9</b>           | Amount<br><b>\$100.00</b> |
| City<br><b>Cols</b>   | State<br><b>OH</b>                      | Zip Code<br><b>43209</b> | Form (Cash, Check, etc.)<br><b>ca</b> |                           |
| Full Name of Contributor<br><b>Robert Wiseman</b>             |   |                          | Registration Number, if PAC           |                           |
| Street Address<br><b>6858 Downs St</b>                        | Employer/Occupation/Labor Organization* |                          | M D Y<br><b>0 5 1 8 0 9</b>           | Amount<br><b>\$100.00</b> |
| City<br><b>Worthington</b>                                    | State<br><b>OH</b>                      | Zip Code<br><b>43085</b> | Form (Cash, Check, etc.)<br><b>ck</b> |                           |
| Full Name of Contributor<br><b>Julie M Lynch</b>              |   |                          | Registration Number, if PAC           |                           |
| Street Address<br><b>1208 Sanctuary Pl</b>                    | Employer/Occupation/Labor Organization* |                          | M D Y<br><b>0 5 1 8 0 9</b>           | Amount<br><b>\$100.00</b> |
| City<br><b>Gahanna</b>  | State<br><b>OH</b>                      | Zip Code<br><b>43230</b> | Form (Cash, Check, etc.)<br><b>ck</b> |                           |
| Full Name of Contributor<br><b>Deborah Maller</b>             |   |                          | Registration Number, if PAC           |                           |
| Street Address<br><b>11774 Kennington Sq</b>                  | Employer/Occupation/Labor Organization* |                          | M D Y<br><b>0 5 2 0 0 9</b>           | Amount<br><b>\$100.00</b> |
| City<br><b>Pickerington</b>                                   | State<br><b>OH</b>                      | Zip Code<br><b>43147</b> | Form (Cash, Check, etc.)<br><b>ck</b> |                           |
| Full Name of Contributor<br><b>Donald Harris</b>              |   |                          | Registration Number, if PAC           |                           |
| Street Address<br><b>7035 Greensview Dr</b>                   | Employer/Occupation/Labor Organization* |                          | M D Y<br><b>0 5 1 9 0 9</b>           | Amount<br><b>\$100.00</b> |
| City<br><b>Canal Winchester</b>                               | State<br><b>OH</b>                      | Zip Code<br><b>43110</b> | Form (Cash, Check, etc.)<br><b>ck</b> |                           |
| Full Name of Contributor<br><b>Michael T Shannon</b>          |   |                          | Registration Number, if PAC           |                           |
| Street Address<br><b>5166 Etna Rd</b>                         | Employer/Occupation/Labor Organization* |                          | M D Y<br><b>0 5 2 2 0 9</b>           | Amount<br><b>\$400.00</b> |
| City<br><b>Whitehall</b>                                      | State<br><b>OH</b>                      | Zip Code<br><b>43213</b> | Form (Cash, Check, etc.)<br><b>ck</b> |                           |

\* 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

**\$0.00**

Total expenditures this event.

**\$0.00**

Page Total \$ **\$1,000.00**