

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

Prescribed by Secretary of State 03/05

Name of Committee in Full Wolfe For Mayor Committee				
Full Name of Contributor Daniel T> Burdick			Registration Number, if PAC	
Street Address 5740 Frederick Pk	Employer/Occupation/Labor Organization*		M 0	D 5
City Dayton	State OH	Zip Code 45414	Y 1	Amount \$100.00
Form (Cash, Check, etc.) ck				
Full Name of Contributor Nick Soulas			Registration Number, if PAC	
Street Address 3923 E> Brad St	Employer/Occupation/Labor Organization*		M 0	D 5
City Whitehall	State OH	Zip Code 43213	Y 1	Amount \$400.00
Form (Cash, Check, etc.)				
Full Name of Contributor George Arnold			Registration Number, if PAC	
Street Address 3020 Dale Ave	Employer/Occupation/Labor Organization*		M 0	D 5
City Cols	State OH	Zip Code 43209	Y 1	Amount \$100.00
Form (Cash, Check, etc.) ck				
Full Name of Contributor Brent Howard			Registration Number, if PAC	
Street Address 348 Cumberland Dr	Employer/Occupation/Labor Organization*		M 0	D 5
City Whitehall	State OH	Zip Code 43213	Y 1	Amount \$50.00
Form (Cash, Check, etc.) ck				
Full Name of Contributor J Michael Asebrook			Registration Number, if PAC	
Street Address 454 E Main #236	Employer/Occupation/Labor Organization*		M 0	D 5
City Cols	State OH	Zip Code 43215	Y 1	Amount \$200.00
Form (Cash, Check, etc.) ck				
Full Name of Contributor Richard Zitzke			Registration Number, if PAC	
Street Address 365 S. Yearling Rd	Employer/Occupation/Labor Organization*		M 0	D 5
City Whitehall	State OH	Zip Code 43213	Y 1	Amount \$100.00
Form (Cash, Check, etc.) ca				
Full Name of Contributor Rob Mc Kelvey			Registration Number, if PAC	
Street Address 365 S> Yearling Rd	Employer/Occupation/Labor Organization*		M 0	D 5
City Whitehall	State OH	Zip Code 43213	Y 1	Amount \$100.00
Form (Cash, Check, etc.) ca				

* 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 \$ **\$1,050.00**