31-E R.C. 3517.10(B)

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

Event	Date	02/20/2013
Page	3	2.20.13

Prescribed by Secretary of State 3/05

	 -	···	 						
Name of Committee in Full									
Paula Brooks Committee		·							
Full Name of Contributor				Registration Number, if PAC					
Grant Morrow III		<u> </u>	М						
Street Address	Employer/O	Employer/Occupation/Labor Organization*		D	Y	Amount			
253 N. Columbia Ave			02	07	13		\$150.00		
City	State	Zip Code	Form (Cash, Check, etc.)						
Columbus	ОН	43209	Check	Check					
Full Name of Contributor	ull Name of Contributor				Registration Number, if PAC				
Michael Gonsiorowski									
Street Address	Employer/O	Occupation/Labor Organization*	М	D	Y	Amount			
2666 Brentwood Rd			02	25	13		\$150.00		
City	State	Zip Code	Form	Cash C	heck et	e)			
Bexley	ОН	43209-2111		Form (Cash, Check, etc.) Check					
Full Name of Contributor				Registration Number, if PAC					
Don E. Cook			1.05		,				
Street Address	Employer/C	Occupation/Labor Organization*	М	Ð	Y	Amount			
2585 Canterbury Rd			02	07	13		\$200.00		
City	State	Zip Code	Form	(Cash (Theck, et	(.)			
Columbus	ОН	43221-3013		Form (Cash, Check, etc.) Check					
Full Name of Contributor				Registration Number, if PAC					
Carl Faller									
Street Address	Employer/C	Occupation/Labor Organization*	M	D	Y	Amount			
938 City Park Ave			02	14	13		\$250.00		
City	State	Zip Code	Form	(Cash (Theck, e	tc.)			
Columbus	ОН	43206-2514		Form (Cash, Check, etc.) Check					
Full Name of Contributor			Registration Number, if PAC						
Edward P Ferris			<u> </u>						
Street Address	Employer/Occupation/Labor Organization*		М	D	Y	Amount			
1959 Collingswood Rd			02	22	13		\$250.00		
City	State	Zip Code	Form	Form (Cash, Check, etc.)					
Columbus	ОН	43221-3739	L	Check					
· · · · · · · · · · · · · · · · · · ·			. 0.1.00						

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 \$	1,000.00

^{*} 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)]