

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Re-elect Westcamp Mayor</b>					
Full Name of Contributor <b>Ralph &amp; Peggy Portier</b>				Registration Number, if PAC	
Street Address <b>9841 Refugee Rd.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Pickerington</b>	State <b>OH</b>	Zip Code <b>43147</b>	Amount <b>\$50.00</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>William Nesbitt</b>				Registration Number, if PAC	
Street Address <b>2657 Amberwick</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>	Amount <b>\$50.00</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>Thomas Byrne</b>				Registration Number, if PAC	
Street Address <b>10024 Rockwell Rd.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Mt. Sterling</b>	State <b>OH</b>	Zip Code <b>43143</b>	Amount <b>\$50.00</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>Jerry &amp; Kim Clements</b>				Registration Number, if PAC	
Street Address <b>3467 London-Lancaster Rd.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Groveport</b>	State <b>OH</b>	Zip Code <b>43125</b>	Amount <b>\$50.00</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>Rachel &amp; Tony Owens</b>				Registration Number, if PAC	
Street Address <b>506 Greenhill Dr.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Groveport</b>	State <b>OH</b>	Zip Code <b>43125</b>	Amount <b>\$25.00</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>Eric Dehays</b>				Registration Number, if PAC	
Street Address <b>4828 Bixby Ridge</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Groveport</b>	State <b>OH</b>	Zip Code <b>43125</b>	Amount <b>\$25.00</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>Jean Ann Hibert</b>				Registration Number, if PAC	
Street Address <b>814 Main Street</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Groveport</b>	State <b>OH</b>	Zip Code <b>43125</b>	Amount <b>\$25.00</b>	Form (Cash, Check, etc.) <b>check</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

**\$3,295.00**

Total expenditures this event.

**\$500.00**

Page Total \$ **\$275.00**