31-E
R.C. 3517.10(B)

Event Date 7/17/2015
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Statement of Contributions Received

at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full					
Friends of Sean McMullen					
Full Name of Contributor				**Registration Number, if PAC**	
Lloyd Peterson					
Street Address	**Employer/Occupation/Labor Organization***			**M D Y**	**Amount**
815 Lakes Edge Drive				07 17 15	20.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**	
Pickerington	OH	43147		Cash	
Full Name of Contributor				**Registration Number, if PAC**	
Elisabeth E. Wallace					
Street Address	**Employer/Occupation/Labor Organization***			**M D Y**	**Amount**
344 Pathfinder Drive				07 17 15	10.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**	
Reynoldsburg	OH	43068		Check	
Full Name of Contributor				**Registration Number, if PAC**	
Antoinette Wilson					
Street Address	**Employer/Occupation/Labor Organization***			**M D Y**	**Amount**
3500 Fairway Commons Drive				07 17 15	100.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**	
Hilliard	OH	43026-7668		Check	
Full Name of Contributor				**Registration Number, if PAC**	
Joseph S. Begeny					
Street Address	**Employer/Occupation/Labor Organization***			**M D Y**	**Amount**
8840 Kingsley Drive				07 17 15	35.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**	
Reynoldsburg	OH	43068		Check	
Full Name of Contributor				**Registration Number, if PAC**	
Dr. Milroy J. Samuel					
Street Address	**Employer/Occupation/Labor Organization***			**M D Y**	**Amount**
805 Roxbury Court				07 17 15	40.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**	
New Albany	OH	43054		Cash	
Full Name of Contributor				**Registration Number, if PAC**	
Grace Cherrington					
Street Address	**Employer/Occupation/Labor Organization***			**M D Y**	**Amount**
4018 Courter Road				07 17 15	10.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**	
Columbus	OH	43062		Cash	
Full Name of Contributor				**Registration Number, if PAC**	
Zach Thomas					
Street Address	**Employer/Occupation/Labor Organization***			**M D Y**	**Amount**
1968 Opal Street				07 17 15	20.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**	
Reynoldsburg	OH	43068		Cash	

* 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

Page Total $ 235.00