Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

	·
Event Date	8/27/2015
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Page ZO	

Page Total \$

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	Registration Number, if PAC
Employer/Occupation/Labor Organization* Benesch Friedlander	0 8 2 7 1 5 \$500.00
State Zip Code OH 43215	Form (Cash, Check, etc.) Check
	Registration Number, if PAC
Employer/Occupation/Labor Organization*	M D Y Amount
State Zip Code OH	Form (Cash, Check, etc.)
	Registration Number, if PAC
Employer/Occupation/Labor Organization*	M D Y Amount
Staj te Zip Code OH	Form (Cash, Check, etc.)
	Registration Number, if PAC
Employer/Occupation/Labor Organization*	M D Y Amount
State Zip Code	Form (Cash, Check, etc.)
	Registration Number, if PAC
Employer/Occupation/Labor Organization*	M D Y Amount
State Zip Code OH	Form (Cash, Check, etc.)
	Registration Number, if PAC
Employer/Occupation/Labor Organization*	M D Y Amount
State Zip Code OH	Form (Cash, Check, etc.)
	Registration Number, if PAC
Employer/Occupation/Labor Organization*	M D Y Amount
State Zip Code	Form (Cash, Check, etc.)
	State Zip Code

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

if the date continu		
Total contributions this event	Total expenditures this event.	
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\$5,800.00	0.00	¢500.00

the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction ar labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]