

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Porter Committee					
Full Name of Contributor Bessie Carper				Registration Number, if PAC	
Street Address 1461 Windmere Court	Employer/Occupation/Labor Organization* retired		M 1	D 0	Y 13
City Lancaster	State O	Zip Code H 43130	Amount 40.00		
Form(Cash,Check,etc) cash					
Full Name of Contributor Patricia Woodard					
Street Address 1250 Blue Valley Rd				Employer/Occupation/Labor Organization* homemaker	
City Lancaster	State O	Zip Code H 43130	M 1	D 0	Y 13
Amount 50.00					
Form(Cash,Check,etc) cash					
Full Name of Contributor					
Street Address				Employer/Occupation/Labor Organization*	
City	State	Zip Code	M	D	Y
Amount					
Form(Cash,Check,etc)					
Full Name of Contributor					
Street Address				Employer/Occupation/Labor Organization*	
City	State	Zip Code	M	D	Y
Amount					
Form(Cash,Check,etc)					
Full Name of Contributor					
Street Address				Employer/Occupation/Labor Organization*	
City	State	Zip Code	M	D	Y
Amount					
Form(Cash,Check,etc)					
Full Name of Contributor					
Street Address				Employer/Occupation/Labor Organization*	
City	State	Zip Code	M	D	Y
Amount					
Form(Cash,Check,etc)					
Full Name of Contributor					
Street Address				Employer/Occupation/Labor Organization*	
City	State	Zip Code	M	D	Y
Amount					
Form(Cash,Check,etc)					

* 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 \$ 90.00