

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

Prescribed by Secretary of State 03/05

Name of Committee in Full		Registration Number, if PAC	
Printer for Council			
Full Name of Contributor		Registration Number, if PAC	
George J. Siccaras			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
2450 N. High St	George J. Siccaras, Construction	0	2 2 7 1 1 100
City	State Zip Code	Form (Cash, Check, etc.)	
Columbus	OH 43202	Check	
Full Name of Contributor		Registration Number, if PAC	
Bill Klausman			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
75 E. Gay St. Suite 300	Klausman Law, Ltd - Attorney	0	2 2 7 1 1 50
City	State Zip Code	Form (Cash, Check, etc.)	
Columbus	OH 43215	Check	
Full Name of Contributor		Registration Number, if PAC	
Daniel Downey			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
3791 Shallow Creek Dr	Worston Hurd, LLP	0	3 0 5 1 1 250
City	State Zip Code	Form (Cash, Check, etc.)	
Powell	OH 43065	Check	
Full Name of Contributor		Registration Number, if PAC	
Meribeth Decuers			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
8508 Kilbourne Rd	Isaac, Brent, Ledner + Tetro	0	2 2 8 1 1 100
City	State Zip Code	Form (Cash, Check, etc.)	
Sunbury	OH 43074	Check	
Full Name of Contributor		Registration Number, if PAC	
Mitzy Hines - Hines Little Smiles, LLC			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
5715 N. Hamilton Rd	Member, Hines Little Smiles, LLC	0	3 0 8 1 1 150
City	State Zip Code	Form (Cash, Check, etc.)	
Columbus	OH 43230	Check	
Full Name of Contributor		Registration Number, if PAC	
Michael Silberstein			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
1093 Fountain Lane Apt. D		0	6 2 3 1 1 50
City	State Zip Code	Form (Cash, Check, etc.)	
Columbus	OH 43213	Check	
Full Name of Contributor		Registration Number, if PAC	
Dean Adamantidis			
Street Address	Employer/Occupation/Labor Organization*	M	D Y Amount
2320 Kensington Dr		0	3 1 0 1 1 100
City	State Zip Code	Form (Cash, Check, etc.)	
Columbus	OH 43221	Check	

* 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

1500 00

Total expenditures this event.

249.64

Page Total \$ 800