

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

Prescribed by Secretary of State 3/05

Event Date <u>10/03/2012</u>
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Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor Phil S Bradford III			Registration Number, if PAC			
Street Address 4520 Benderton C5	Employer/Occupation/Labor Organization*		M 10	D 03	Y 12	Amount \$250.00
City Columbus	State OH	Zip Code 43220	Form (Cash, Check, etc.) Check			
Full Name of Contributor Frank J Cipriano			Registration Number, if PAC			
Street Address 39 E Whittier St	Employer/Occupation/Labor Organization*		M 10	D 04	Y 12	Amount \$250.00
City Columbus	State OH	Zip Code 43206-2026	Form (Cash, Check, etc.) Check			
Full Name of Contributor Alex Shumate			Registration Number, if PAC			
Street Address 209 Springbrook Pl	Employer/Occupation/Labor Organization*		M 10	D 10	Y 12	Amount \$500.00
City Gahanna	State OH	Zip Code 43230-6240	Form (Cash, Check, etc.) Check			
Full Name of Contributor John Johnson			Registration Number, if PAC			
Street Address 6808 Inverness St	Employer/Occupation/Labor Organization*		M 10	D 03	Y 12	Amount \$500.00
City Westerville	State OH	Zip Code 43082-7749	Form (Cash, Check, etc.) Check			
Full Name of Contributor Stephen S Wittmann			Registration Number, if PAC			
Street Address 3383 Mann Rd	Employer/Occupation/Labor Organization*		M 10	D 04	Y 12	Amount \$500.00
City Blacklick	State OH	Zip Code 43004-8725	Form (Cash, Check, etc.) 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 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.

\$4,605.00

\$1,281.00

Page Total \$ 2,000.00
