

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

Prescribed by Secretary of State 2/01

Name of Committee in Full <u>Comm. Hce for Joseph W. Trista</u>							
Full Name of Contributor <u>John Haveisen</u>				Registration Number, if PAC			
Street Address <u>587 Fox Ln.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Worthington</u>		State <u>OH</u>	Zip Code <u>43085</u>	<u>09</u>	<u>10</u>	<u>08</u>	<u>35.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Dana Rinehart</u>				Registration Number, if PAC			
Street Address <u>300 E. Broad St.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43215</u>	<u>09</u>	<u>10</u>	<u>08</u>	<u>35.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Dorothy Curtin</u>				Registration Number, if PAC			
Street Address <u>79 Kimothly Dr.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Westerville</u>		State <u>OH</u>	Zip Code <u>43081</u>	<u>09</u>	<u>22</u>	<u>08</u>	<u>35.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Celia Forker</u>				Registration Number, if PAC			
Street Address <u>1942 Stelzer Rd.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43219</u>	<u>09</u>	<u>22</u>	<u>08</u>	<u>35.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Helen Sprankel</u>				Registration Number, if PAC			
Street Address <u>847 E. Ninth Broadway</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43224</u>	<u>09</u>	<u>22</u>	<u>08</u>	<u>20.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Jerone Solove</u>				Registration Number, if PAC			
Street Address <u>2372 Bryten Dr.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Powell</u>		State <u>OH</u>	Zip Code <u>43065</u>	<u>09</u>	<u>22</u>	<u>08</u>	<u>35.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			
Full Name of Contributor <u>Ed Haverstein</u>				Registration Number, if PAC			
Street Address <u>2926 E. Mound St.</u>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43209</u>	<u>09</u>	<u>22</u>	<u>08</u>	<u>50.00</u>
				Form (Cash, Check, etc.) <u>Check</u>			

\* Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, occupation 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

--	--

Total expenditures this event.

--	--

Page Total \$ 245.00