31-A R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee							
Full Name of Contributor Carpenters Local Union 200 PCE			Regis PCE	Registration Number, if PAC PCE			
Street Address 1545 Alum Creek Dr	Employ	Employer/Occupation/Labor O				Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	M 08	D 28	Y 2013	Amount \$1,000.00	
Fulf Name of Contributor Carpenters Local Union 200 PCE				Registration Number, if PAC PCE			
Street Address 1545 Alum Creek Dr	Employ	Employer/Occupation/Labor Organ				Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	M 12	D 19	Y 2013	Amount \$1,000.00	
Full Name of Contributor Regineration Regine				egistration Number, if PAC			
Street Address 4400 Shull Rd	Employ	Employer/Occupation/Labor Orga				Form (Cash, Check, etc.) Credit Card	
City Gahanna	State OH	Zip Code 43230-1951	М 09	D 19	Y 2013	Amount \$1,000.00	
Full Name of Contributor Roxyanne Cartier Burrus				Registration Number, if PAC			
Street Address 7955 Cheriton Cir	Emplo	Employer/Occupation/Labor Organization* Form Cred					
City Reynoldsburg	State OH	Zip Code 43068-9457	М 08	D 14	Y 2013	Amount \$50.00	
Full Name of Contributor Registration Number William Burgett					ber, if PAC		
Street Address 3680 Nicoya Ct	Emplo	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Credit Card	
City Lewis Center	State OH	Zip Code 43035-9353	M 12	D 16	Y 2013	Amount \$1,000.00	

Page Total \$4,050.00

^{*} 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)]