

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

Prescribed by Secretary of State 3/05

Event Date <u>06/18/2013</u>
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Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor Zach Space			Registration Number, if PAC			
Street Address 4 Parkview Dr	Employer/Occupation/Labor Organization*		M 06	D 20	Y 13	Amount \$250.00
City Dover	State OH	Zip Code 44622-1168	Form (Cash, Check, etc.) Check			
Full Name of Contributor George J Sicaras			Registration Number, if PAC			
Street Address 2988 N High St	Employer/Occupation/Labor Organization*		M 06	D 20	Y 13	Amount \$500.00
City Columbus	State OH	Zip Code 43202-1155	Form (Cash, Check, etc.) Check			
Full Name of Contributor Mary S. Duffey			Registration Number, if PAC			
Street Address 4740 Hayden Run Rd	Employer/Occupation/Labor Organization*		M 06	D 24	Y 13	Amount \$500.00
City Columbus	State OH	Zip Code 43221-5905	Form (Cash, Check, etc.) Check			
Full Name of Contributor Shirine Mafi			Registration Number, if PAC			
Street Address 811 Troon Trl	Employer/Occupation/Labor Organization*		M 06	D 20	Y 13	Amount \$500.00
City Columbus	State OH	Zip Code 43085-2949	Form (Cash, Check, etc.) Check			
Full Name of Contributor James G Sicaras			Registration Number, if PAC			
Street Address 1955 Upper Chelsea Rd	Employer/Occupation/Labor Organization*		M 05	D 23	Y 13	Amount \$2,000.00
City Columbus	State OH	Zip Code 43221	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.

\$7,300.00

\$490.66

Page Total \$ 3,750.00