Event Date	7/17/15
Page	22

## Statement of Contributions Received at a Social or Fundraising Event

State   Zip Code   Form(Cash, Check, etc)	<u> </u>	Prescribed by Secretary of State 3/05		
Registration Number, if PAC   Annount   Anno		<del>-</del>		
Anonymous Cash Contributions    Employer/Occupation*Labor Organization*		<u> </u>	In the service	
Employer/Occupation/Labor Organization*				
			M D Y Amount	
State   Zip Code   Form(Cash, Check, re)   Cash	Street Address	ranpioyer/Occupation Labor Organization	1 1 1	
Cash	City	State Zip Code		
Employer/Occupation/Labor Organization*   M   D   Y   Amount			Cash	
	Full Name of Contributor	•	Registration Number, if PAC	
Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code  Employer/Occupation/Labor Organization*  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code  Form(Cash, Check, etc)  State Zip Code  Form(Cash, Check, etc)  State Zip Code  Form(Cash, Check, etc)  Street Address  Employer/Occupation/Labor Organization*  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code  Form(Cash, Check, etc)  Employer/Occupation/Labor Organization*  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization*  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization*  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code  Form(Cash, Check, etc)  Employer/Occupation/Labor Organization*  M D Y Amount  Amount  City  State Zip Code  Form(Cash, Check, etc)  Employer/Occupation/Labor Organization*  M D Y Amount  Amount  City  State Zip Code  Form(Cash, Check, etc)	Street Address	Employer/Occupation/Labor Organization*	M D Y Amount	
Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code Form(Cash,Check,etc)  Employer/Occupation/Labor Organization*  M D Y Amount  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code Form(Cash,Check,etc)  State Zip Code Form(Cash,Check,etc)  Street Address  Employer/Occupation/Labor Organization*  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code Form(Cash,Check,etc)  Employer/Occupation/Labor Organization*  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  Amount  City  State Zip Code Form(Cash,Check,etc)  Employer/Occupation/Labor Organization*  M D Y Amount  Amount  City  State Zip Code Form(Cash,Check,etc)  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code Form(Cash,Check,etc)				
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Street Address   Employer/Occupation/Labor Organization*				
City  State   Zip Code   Form(Cash, Check, etc)  Registration Number, if PAC  Street Address   Employer/Occupation/Labor Organization*   M   D   Y   Amount    Full Name of Contributor   Registration Number, if PAC  Street Address   Employer/Occupation/Labor Organization*   M   D   Y   Amount    City   State   Zip Code   Form(Cash, Check, etc)    Street Address   Employer/Occupation/Labor Organization*   M   D   Y   Amount    City   State   Zip Code   Form(Cash, Check, etc)    Street Address   Employer/Occupation/Labor Organization*   M   D   Y   Amount    City   State   Zip Code   Form(Cash, Check, etc)    Street Address   Employer/Occupation/Labor Organization*   M   D   Y   Amount    City   State   Zip Code   Form(Cash, Check, etc)    Full Name of Contributor   Registration Number, if PAC  Street Address   Employer/Occupation/Labor Organization*   M   D   Y   Amount    Full Name of Contributor   Registration Number, if PAC  Street Address   Employer/Occupation/Labor Organization*   M   D   Y   Amount    Full Name of Contributor   Registration Number, if PAC	Full Name of Contributor		Registration Number, if PAC	
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Employer/Occupation/Labor Organization*   M   D   Y   Amount	City	State Zip Code	Form(Cash,Check,etc)	
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City  State Zip Code Form(Cash, Check, etc)  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code Form(Cash, Check, etc)  Full Name of Contributor  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code Form(Cash, Check, etc)  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code Form(Cash, Check, etc)  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount	Full Name of Contributor		Registration Number, if PAC	
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Street Address    Employer/Occupation/Labor Organization*   M   D   Y   Amount	City	State Zip Code	Form(Cash,Check,etc)	
City  State Zip Code Form(Cash,Check,etc)  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  City  State Zip Code Form(Cash,Check,etc)  Full Name of Contributor  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization*  Registration Number, if PAC  Street Address  Employer/Occupation/Labor Organization*  M D Y Amount  Full Name of Contributor  Street Address  Employer/Occupation/Labor Organization*  Figure (Och Check, etc.)	Full Name of Contributor		Registration Number, if PAC	
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Some 12's Code Section (Code Check etc.)	Full Name of Contributor		Registration Number, if PAC	
Form (Coch Check etc.)	Communication of the communica	Employer/Occupation Labor Organization*	M D Y Amount	
State Zin Code Form(Cash.Check.etc)	Street Moditess		1 1 1 1 1	
City State 24 code	City	State Zip Code	Form(Cash,Check,etc)	
	•			

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

Total contributions this event	Total expenditures this event		
		Page Total S	<u>45.00</u>