

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

Prescribed by Secretary of State 3/05

Event Date 11/15/2011
Page 7 11.15Bravo

Name of Committee in Full Paula Brooks Committee				
Full Name of Contributor Frederick R Smith			Registration Number, if PAC	
Street Address 3040 McKinley Ave	Employer/Occupation/Labor Organization*		M 11	D 10
City Columbus	State OH	Zip Code 43204-3653	Y 11	Amount \$500.00
			Form (Cash, Check, etc.) Check	
Full Name of Contributor Thomas J. Katzenmeyer			Registration Number, if PAC	
Street Address 448 W Nationwide Blvd	Employer/Occupation/Labor Organization*		M 11	D 16
City Columbus	State OH	Zip Code 43215-2396	Y 11	Amount \$500.00
			Form (Cash, Check, etc.) Check	
Full Name of Contributor Elisa Wolfe			Registration Number, if PAC	
Street Address PO Box 516	Employer/Occupation/Labor Organization*		M 11	D 10
City Granville	State OH	Zip Code 43023-0516	Y 11	Amount \$500.00
			Form (Cash, Check, etc.) Credit Card	
Full Name of Contributor Dick V Patchen			Registration Number, if PAC	
Street Address 366 E Broad St	Employer/Occupation/Labor Organization*		M 11	D 04
City Columbus	State OH	Zip Code 43215-3819	Y 11	Amount \$500.00
			Form (Cash, Check, etc.) Check	
Full Name of Contributor Gay S Pinnell			Registration Number, if PAC	
Street Address 6521 Quarry Ln	Employer/Occupation/Labor Organization*		M 11	D 01
City Dublin	State OH	Zip Code 43017-7503	Y 11	Amount \$500.00
			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.

\$33,590.00

\$818.68

Page Total \$ 2,500.00