

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

Prescribed by Secretary of State 02/01

Name of Committee in Full <b>Friends For Porter Committee</b>					
Full Name of Contributor <b>Thomas Grote</b>				Registration Number, if PAC	
Street Address <b>1 Miranova Place</b>	Employer/Occupation/Labor Organization* <b>Donatos</b>		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>500.00</b>
Full Name of Contributor <b>Sherrie Passmore</b>				Registration Number, if PAC	
Street Address <b>431 Whitley Dr</b>	Employer/Occupation/Labor Organization* <b>City of Columbus</b>		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Gahanna</b>	State <b>O</b>	Zip Code <b>43230</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Sherrie Passmore</b>				Registration Number, if PAC	
Street Address <b>431 Whitley Dr</b>	Employer/Occupation/Labor Organization* <b>City of Columbus</b>		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Gahanna</b>	State <b>O</b>	Zip Code <b>43230</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>Steven Shellabarger</b>				Registration Number, if PAC	
Street Address <b>948 Neil Ave</b>	Employer/Occupation/Labor Organization* <b>self</b>		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43201</b>	Form(Cash,C y Ave <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>Anthony Mariani</b>				Registration Number, if PAC	
Street Address <b>5315 Berrywood Dr</b>	Employer/Occupation/Labor Organization* <b>Nordstrom</b>		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43220</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>John Sowers</b>				Registration Number, if PAC	
Street Address <b>446 Stanley Ave</b>	Employer/Occupation/Labor Organization* <b>First Data International</b>		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>Donald Greiner</b>				Registration Number, if PAC	
Street Address <b>4025 Angola Rd</b>	Employer/Occupation/Labor Organization* <b>Safe Auto</b>		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Toledo</b>	State <b>O</b>	Zip Code <b>43615</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>

\* 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 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

900.00

Total expenditures this event

0.00

Page Total \$ 850.00