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

Event Date_9/29/11	
Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full				
Committee To Elect Mike Shannon				
Full Name of Contributor			Registration Number, if PAC	
Daniel Heinmiller			ļ	
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount	
508 Mechwart Place			0 9 2 9 1 1 \$50.00	
City	Sta to	Zip Code	Form (Cash, Check, etc.)	
Gahanna	OH	43230	check	
Full Name of Contributor		-	Registration Number, if PAC	
J. Scott Weisman				
Street Address	Employer/Occupa	ation/Labor Organization*	M D Y Amount	
601 S. High St.		la: o i	0 9 2 9 1 1 \$100.00	
Columbus	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	Registration Number, if PAC	
Full Name of Contributor Van Gregg			Registration Number, it PAC	
Street Address	M D Y Amount			
5182 Doral Ave.	Employer/Occupa	stion/Labor Organization*	0 9 2 9 1 1 \$50.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Whitehall	ОН	43213	check	
Full Name of Contributor	011	102.0	Registration Number, if PAC	
Brent Howard				
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount	
348 Cumberland Dr.	Zinpojanojano	o gamen	0 9 2 9 1 1 \$200.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Whitehall	OH	43213	check	
Full Name of Contributor		f	Registration Number, if PAC	
Charles Underwood				
Street Address	Employer/Occupa	ntion/Labor Organization*	M D Y Amount	
731 Fairway Blvd.			0 9 2 9 1 1 \$150.00	
City M/hitahall	Sta te	Zip Code	Form (Cash, Check, etc.)	
Whitehall	OH	43213	check	
Full Name of Contributor Robert Weiler			Registration Number, if PAC	
Street Address 41 S. High St., Ste. 100	Employer/Occupation/Labor Organization*		0 9 2 9 1 1 Amount \$200.00	
City Columbus	OH	Zip Code 43215	Form (Cash, Check, etc.) check	
Full Name of Contributor	011,	70210	Registration Number, if PAC	
Wesley Kantor	Registration Number, it FAC			
Street Address Employer/Occupation/Labor Organization*			M _k D Y Amount	
4082 Elbern Ave.	Employer/Occupa	mon/Labor Organization*	0 9 2 9 1 1 \$25.00	
City	Staj te	Zip Code	Form (Cash, Check, etc.)	
Whitehall	OH	43213	check	
		1		

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
1
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Total expenditures this event.

\$0.00

^{*} 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 also appear. [R.C. 3517.10(B)(4)]