

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Friends for Porter Committee					
Full Name of Contributor Amy Weis				Registration Number, if PAC	
Street Address 3673 Olentangy Blvd	Employer/Occupation/Labor Organization* Attorney		M 1	D 0	Y 5
City Columbus	State O	Zip Code 43214	Amount 40.00		
Form(Cash,Check,etc) cash					
Full Name of Contributor Dana Landrum					
Street Address 642 Chateaugay				Employer/Occupation/Labor Organization* Homemaker	
City Columbus	State O	Zip Code 43004	M 1	D 0	Y 5
Amount 35.00					
Form(Cash,Check,etc) cash					
Full Name of Contributor Greg Dodd					
Street Address 1616 Franklin Ave				Employer/Occupation/Labor Organization* Ohio Arts Council	
City Columbus	State O	Zip Code 43206	M 1	D 0	Y 5
Amount 46.00					
Form(Cash,Check,etc) cash					
Full Name of Contributor John Sowers					
Street Address 446 Stanley Ave				Employer/Occupation/Labor Organization* unknown	
City Columbus	State O	Zip Code 43206	M 1	D 0	Y 5
Amount 35.00					
Form(Cash,Check,etc) check					
Full Name of Contributor Donald J Geiner					
Street Address 934 1/2 Neil Ave				Employer/Occupation/Labor Organization* Stonewall	
City Columbus	State O	Zip Code 43201	M 1	D 0	Y 5
Amount 35.00					
Form(Cash,Check,etc) check					
Full Name of Contributor Sara E Ernest					
Street Address 271 Champion Ave				Employer/Occupation/Labor Organization* Stonewall	
City Columbus	State O	Zip Code 43205	M 1	D 0	Y 5
Amount 20.00					
Form(Cash,Check,etc) check					
Full Name of Contributor Julia N Saylor					
Street Address 576 S Grant				Employer/Occupation/Labor Organization* Make a Wish Foundation	
City Columbus	State O	Zip Code 43206	M 1	D 0	Y 5
Amount 70.00					
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

Page Total \$ 281.00