31-E R.C. 3517.10(B)

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 3/05

Event Date 03/		3/02/2015
Page	13	Kitchen 3/2

Full Name of Contributor					Registration Number, if PAC					
Emily Rush Street Address 99 W 1st Ave	Employer/C	Employer/Occupation/Labor Organization*			Υ	Amount	\$25.00			
99 VV ISLAVE				02	15		\$25.00			
City Columbus	State OH	Zip Code 43201-3403	Form (heck, et	c.)				
Full Name of Contributor					Registration Number, if PAC					
Colleen Schambach Street Address	Fmployer/C	M D Y Amount								
611 Garden Rd	Limployene	Employer/Occupation/Labor Organization*		02	15	, modan	\$50.00			
City Columbus	State OH	Zip Code 43214-2236	Form Credi	(Cash, C t Card	heck, et	c.)	A springer			
Full Name of Contributor Linda L Schuler	ator				Registration Number, if PAC					
Street Address	Employer/C	Employer/Occupation/Labor Organization*		D	Y	Amount				
110 W 1st Ave			03	02	15	•	\$100.00			
City Columbus	State OH	Zip Code 43201-3402	Form Chec		Check, et	c.)				
Full Name of Contributor Kevin Shannan	Registration Number, if PAC									
Street Address	Employer/C	Employer/Occupation/Labor Organization*			Y	Amount	\$100.0			
680 Farrington Dr			03	02	15		\$100.0			
City	State	Zip Code 43085-3534			Check, et	c.) , ,	·			
Worthington Full Name of Contributor		OH 43085-3534				Registration Number, if PAC				
Brian Shinn	М	D	ΙΥ	Amount						
Street Address 137 Morse Rd	EmployerA	Employer/Occupation/Labor Organization*		02	15	Alliouit	\$100.0			
City	State	Zip Code	Form Chec		Check, et	c.)	1 (2 3 M			
Columbus Full Name of Contributor	T ON	OH 43214-1743				Registration Number, if PAC				
Emily Smith		To be 10 and the Opening in the			Y	Amount				
Street Address 175 Webster Park Ave	EmployerA	Employer/Occupation/Labor Organization*		D 02	15	Allouik	\$50.0			
City	State OH	Zip Code 43214-3514			Check, et	tc.)	1			
Columbus Full Name of Contributor	Credit Card Registration Number, if PAC									
State Auto Employees Fed PAC Com	M	Tis	ΙV	T'A - aunt						
Street Address	Employer/G	Employer/Occupation/Labor Organization*		D 02	15	Amount	\$ 500.0			
City	State	State Zip Code			Form (Cash, Check, etc.) Check					
Full Name of Contributor Ted Strickland	1		Regis	tration l	Number,	if PAC				
Street Address 4461 Chowning Way	Employer/4 unemptoy None	Employer/Occupation/Labor Organization*- unemployed None			Y 15	Amount	\$500.0			
City	State	State Zip Code			Form (Cash, Check, etc.)					
Columbus	он	OH 43213			Check					