31-	E
R.C.	3517.10(B)

Event Date	14/17/2013
Page	

Statement of Contributions Received at a Social or Fundraising Event

	Prescribed by Sec	cretary of State 3/05		
Name of Committee in Full				
Citizens for Dorrian Committee			Registration Number, if PAC	
Full Name of Contributor	Name of Contributor			
IBEW Pac Voluntary Fund			1 (000)	_
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount	•
900 Seventh Street N.W.			0 4 0 8 1 3	500.00
City	State	Zip Code	Form(Cash,Check,etc)	
Washington	DIC	20001	Check	
all Name of Contributor		Registration Number, if PAC		
Grange Mutual Casualty Company Ohio Pac		1 64611		
Street Address		ation/Labor Organization*	M D Y Amount	
671 S High St		_	0 4 1 2 1 3	250.00
City	State	Zip Code	Form(Cash,Check,etc)	
Columbus	ОН	43206	Check	
Full Name of Contributor	1 (/ 1 4.4	10200	Registration Number, if PAC	
Michael King Fultz			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
452 Otterbein Ave	Zanpio jan ossap	and basel organization	0 4 1 7 1 3	250.00
City	State	Zip Code	Form(Cash,Check,etc)	250.00
1	OH	43081	Check	
Westerville Full Name of Contributor	() II	45001	Registration Number, if PAC	:
			Registration Number, it FAC	
. Michael C Mentel	- I=		M D Y Amount	
Street Address	Employer/Occupation/Labor Organization*		' - ' -	100.00
22 Preston Rd	SWACO		0 4 2 2 1 3	100.00
City	State	Zip Code	Form(Cash,Check,etc)	
Columbus	OH	43209	Check	
Full Name of Contributor			Registration Number, if PAC	
James M Mentel			·	<u> </u>
Street Address	Employer/Occupa	ation/Labor Organization*	M D Y Amount	
653 Crescent Rd	Retired		0 4 2 2 1 3	100.00
City	State	Zip Code	Form(Cash,Check,etc)	
Columbus	O H_	43204	Check	
Full Name of Contributor		196	Registration Number, if PAC	-
John Royer				
Street Address	Employer/Occupa	ntion/Labor Organization*	M D Y Amount	
1480 Dublin Rd	Kohr Ro	ver Griffith Inc	0 4 2 0 1 3	500.00
City	State	Zip Code	Form(Cash,Check,etc)	
Columbus	OIH	43215	Check	
Full Name of Contributor		· · · · · · · · · · · · · · · · · · ·	Registration Number, if PAC	
Franz Geiger				
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount	
7447 Alpath Rd	Polaris Real Estate		0 4 2 2 1 3	1,000.00
City	State	Zip Code	Form(Cash,Check,etc)	
New Albany	OH	43054	Check	
' ' Tibuity		10001		

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 \$ 2.700.00

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