

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

Prescribed by Secretary of State 03/05

Name of Committee in Full				Registration Number, if PAC			
Painter for Council							
Full Name of Contributor				Amount			
Richard Termubten II				25			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	
495 Columbian Place		Franklin Cty Prosecutor's Ofc.		0	3	26	11
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus		OH	43209	Check			
Full Name of Contributor				Registration Number, if PAC			
David Cook							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
4153 Stargass Ct		Attorney - Vary's		0	4	07	11
City		State	Zip Code	Form (Cash, Check, etc.)			
Hilliard		OH	43026	Check			
Full Name of Contributor				Registration Number, if PAC			
Catharina Russo							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
1029 S. Westington Ave		Franklin Cty Prosecutor's Ofc.		0	4	05	11
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus		OH	43206	Check			
Full Name of Contributor				Registration Number, if PAC			
Luke Streng							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
13 Scott Circle				0	4	06	11
City		State	Zip Code	Form (Cash, Check, etc.)			
Marysville		OH	43040	Check			
Full Name of Contributor				Registration Number, if PAC			
Jennifer Lupica							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
1418 Virginia Ave		Quest Software		0	4	06	11
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus		OH	43212	Check			
Full Name of Contributor				Registration Number, if PAC			
Daniel Harkins							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
630 Lawson Drive		Franklin Cty. Prosecutor's Ofc.		0	4	06	11
City		State	Zip Code	Form (Cash, Check, etc.)			
Westerville		OH	43081	Check			
Full Name of Contributor				Registration Number, if PAC			
Patrick Piccininni							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
2024 Tewksbury Rd		Franklin Cty Prosecutor's Ofc.		0	4	06	11
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus		OH	43221	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 also 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

445	00
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Total expenditures this event.

561	13
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Page Total \$

425