

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Citizens for Dorrian Committee						
Full Name of Contributor David S Borrer			Registration Number, if PAC			
Street Address 4280 Hayden Run Rd	Employer/Occupation/Labor Organization* Borrer Co.		M 0	D 1	Y 2	Amount 500.00
City Dublin	State O	Zip Code H 43017	Form(Cash,Check,etc) Check			
Full Name of Contributor Robert Meyer Jr			Registration Number, if PAC			
Street Address 671 Vivian Ct	Employer/Occupation/Labor Organization* Borrer Co.		M 0	D 1	Y 2	Amount 500.00
City Gahanna	State O	Zip Code H 43230	Form(Cash,Check,etc) Check			
Full Name of Contributor Donald A Borrer			Registration Number, if PAC			
Street Address 2100 Sheringham Rd	Employer/Occupation/Labor Organization* Borrer Co.		M 0	D 1	Y 2	Amount 1,000.00
City Columbus	State O	Zip Code H 43220	Form(Cash,Check,etc) Check			
Full Name of Contributor Douglas Borrer			Registration Number, if PAC			
Street Address 5500 Dublin Rd	Employer/Occupation/Labor Organization* Borrer Co.		M 0	D 1	Y 2	Amount 1,000.00
City Dublin	State O	Zip Code H 43017	Form(Cash,Check,etc) Check			
Full Name of Contributor Karen A Winters			Registration Number, if PAC			
Street Address 2340 Oxford Rd	Employer/Occupation/Labor Organization* Attorney		M 0	D 1	Y 2	Amount 250.00
City Columbus	State O	Zip Code H 43221	Form(Cash,Check,etc) Check			
Full Name of Contributor Gregory W Stype			Registration Number, if PAC			
Street Address 2232 Tremont Rd	Employer/Occupation/Labor Organization* Attorney		M 0	D 1	Y 2	Amount 250.00
City Columbus	State O	Zip Code H 43221	Form(Cash,Check,etc) Check			
Full Name of Contributor Fredric L Smith			Registration Number, if PAC			
Street Address 2474 Danvers Ct.	Employer/Occupation/Labor Organization* Attorney		M 0	D 1	Y 2	Amount 250.00
City Columbus	State O	Zip Code H 43220	Form(Cash,Check,etc) Check			

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 3,750.00