31-E
R.C. 3517.10(B)

Event Date 4/2/15
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# Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full: Friends of Kristin Bryant

| Full Name of Contributor | Street Address | City | State | Zip Code | Employer/Occupation/Labor Organization* | Registration Number, if PAC | M | D | Y | Amount | Form(Cash,Check,etc) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Deborah Dunlap | 9140 McMahon Ct | Reynoldsburg | OH | 43068 | | | 04 | 07 | 15 | 50.00 | Check |
| Jean M Williams | 6367 Portsmouth Dr | Reynoldsburg | OH | 43068 | | | 04 | 07 | 15 | 25.00 | Check |
| Jennifer Lynn Doty | PO Box 18 | Belmont | WV | 26134 | | | 04 | 07 | 15 | 25.00 | Check |
| Lisa A Jones | 6644 Rosetree Drive | Reynoldsburg | OH | 43068 | | | 04 | 07 | 15 | 25.00 | Check |
| Marcia L McKeen | 7461 Lindbrook Ct | Reynoldsburg | OH | 43068 | | | 04 | 07 | 15 | 75.00 | Check |
| Lori L Karram-Jones | 2323 Bush Blvd | Reynoldsburg | OH | 43068 | | | 04 | 07 | 15 | 25.00 | Check |
| Tori A Begeny | 8840 Kingsley Dr | Reynoldsburg | OH | 43068 | | | 04 | 07 | 15 | 25.00 | 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 $ 250.00