

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full <b>Karnes For Sheriff Committee</b>					
Full Name of Contributor <b>David Lancione, LLC - Attorney at Law</b>				Registration Number, if PAC	
Street Address <b>1041 Summit Street</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Columbus</b>		State <b>O</b>	Zip Code <b>43201</b>	Y <b>0</b>	Amount <b>100.00</b>
				Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>J Gregory Hart</b>				Registration Number, if PAC	
Street Address <b>PO Box 298 - 2417 DARBY CREEK RD</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Galloway</b>		State <b>O</b>	Zip Code <b>43119</b>	Y <b>0</b>	Amount <b>190.00</b>
				Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Paul Tipps</b>				Registration Number, if PAC	
Street Address <b>137 East State Street</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Columbus</b>		State <b>O</b>	Zip Code <b>43215</b>	Y <b>0</b>	Amount <b>250.00</b>
				Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Robert Timmons</b>				Registration Number, if PAC	
Street Address <b>3773 Mill Stream Drive</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Hilliard</b>		State <b>O</b>	Zip Code <b>43026</b>	Y <b>0</b>	Amount <b>230.00</b>
				Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Ralph E Casto</b>				Registration Number, if PAC	
Street Address <b>1010 Rousseau Ln.</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Galloway</b>		State <b>O</b>	Zip Code <b>43119</b>	Y <b>1</b>	Amount <b>30.00</b>
				Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Desiree Dardio Wills</b>				Registration Number, if PAC	
Street Address <b>7177 Stahl Road</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Orient</b>		State <b>O</b>	Zip Code <b>43146</b>	Y <b>0</b>	Amount <b>100.00</b>
				Form(Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>David A Shaffer</b>				Registration Number, if PAC	
Street Address <b>1350 Oxley Road</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>
City <b>Columbus</b>		State <b>O</b>	Zip Code <b>43212</b>	Y <b>2</b>	Amount <b>100.00</b>
				Form(Cash, Check, etc) <b>Check</b>	

\* 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 \$ 1,000.00