

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

Prescribed by Secretary of State 3/05

Event Date <u>06/20/2012</u>
Page <u>3</u> Yenkin

Name of Committee in Full Paula Brooks Committee							
Full Name of Contributor Eric D Fingerhut				Registration Number, if PAC			
Street Address 84 N Ardmore Rd		Employer/Occupation/Labor Organization*		M 06	D 21	Y 12	Amount \$100.00
City Columbus		State OH	Zip Code 43209-1445		Form (Cash, Check, etc.) Check		
Full Name of Contributor Laura P. Zakin				Registration Number, if PAC			
Street Address 6550 Evening St		Employer/Occupation/Labor Organization*		M 06	D 21	Y 12	Amount \$150.00
City Worthington		State OH	Zip Code 43085-3072		Form (Cash, Check, etc.) Check		
Full Name of Contributor Tim Madison				Registration Number, if PAC			
Street Address 127 S Dawson Ave		Employer/Occupation/Labor Organization*		M 06	D 21	Y 12	Amount \$150.00
City Bexley		State OH	Zip Code 43209-1730		Form (Cash, Check, etc.) Check		
Full Name of Contributor Seyman L Stern				Registration Number, if PAC			
Street Address 2728 Brentwood Rd		Employer/Occupation/Labor Organization*		M 06	D 21	Y 12	Amount \$250.00
City Columbus		State OH	Zip Code 43209-2219		Form (Cash, Check, etc.) Check		
Full Name of Contributor Robert D. Weisman				Registration Number, if PAC			
Street Address 7277 Penneyroyal Pl		Employer/Occupation/Labor Organization*		M 06	D 21	Y 12	Amount \$500.00
City Dublin		State OH	Zip Code 43017-2171		Form (Cash, Check, etc.) 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.

\$15,100.00

\$1,059.38

Page Total \$ 1,150.00