31-E R.C. 3517.10(B)

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 2/01

Event Date	10/6	105
Page <u>2</u>		*

Name of Committee in Full				
Committee for Joseph W	1-1			· .
Full Name of Contributor	1 ESTE	· · · · · · · · · · · · · · · · · · ·	Registration Number, if PA	.c
				
Street Address			M D Y	Amount
	Employer/Occupation/La	bor Organization*		35-00
3282 Welsh Hobey Kd.	Sulse las	Codo	/ 00705 Form (Cash, Check, etc.)	33-00
City / /	1 1 1		$\vec{c} \cdot \vec{l} \cdot \vec{l}$	
1/6/12	OH	43017	Pagistration Number if PA	C
Full Name of Contributor	•		Registration Number, if PA	~
Karen Schuab	<u> </u>		M D V	: A mount
4626 Deales	Employer/Occupation/Lat	bor Organization*	100705	Agmount 35-00
City City	Sta te Zip C	Code	Form (Cash, Check, etc.)	•
12612	OH	43017	Check	
Full Name of Contributor	·		Registration Number, if PA	С
Chris Soteriadas				
Street Address	Employer/Occupation/Lal	bor Organization*	M D Y	Amount
811 Northwest Blud.		_	100705 Form (Cash, Check, etc.)	35.60
City		1	ronn (Cash, Check, etc.)	
Columbis	OHI	43212	Check	6
Full Name of Contributor			Registration Number, if PA	C
Jacqueline Haines	· · · · · · · · · · · · · · · · · · ·		M IN IV	Amount
Street Address	Employer/Occupation/Lal	bor Organization*		Amount
3134 Cranston Dr.	Stalte 175	Codo	100705 Form (Cash, Check, etc.)	35-00
City /	1 1 -			
Full Name of Contributor	OH	43017	Check Registration Number, if PA	C
1			registration Number, if PA	
Mike Kibbey	I=a .		M N V	Amount
Street Address	Employer/Occupation/La	bor Organization*	100705	35-00
City	Sta to 7:-	Code	Form (Cash, Check, etc.)	33 - 60
	1		rom (Cash, Check, etc.)	
Columbs		43206	Registration Number, if PA	VC
Full Name of Contributor			Registration Number, II PA	
Street Address	, 		M D Y	Amount
6917 Bets Pl	Employer/Occupation/La	abor Organization*	101105	35.00
City	Sta te Zip	Code	Form (Cash, Check, etc.)	
Worthington	01-1	43085	Check	
Full Name of Contributor			Registration Number, if Pa	AC
Holer Kosnick				
Street Address	Employer/Occupation/La	abor Organization*	M D Y	Amount
6917 Betsy P1.			101105	35.00
City		Code	Form (Cash, Check, etc.)	
Worthington	OH	43085	Check	
* Required for contributions from individuals over \$100 to statewide and Gene	ral Accombly candidates. I	facutarbutor is self employed or	cupation rather than	

otal contributions this event		Total expenditures this event.		1/
	-et-differt medianu 347°		Page Total \$ 245.	0

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)]