31-E
R.C. 3517.10(B)

FOR PAPER FILING ONLY

Event Date 6/27/12
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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								
Everyone for Ed Leonard								
Full Name of Contributor				**Registration Number, if PAC**				
Wayne B. Harer								
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**	
2549 Tremont Rd	Continental Real Estate/VP			0 7	0 9	1 2	250.00	
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**				
Columbus	O H	43221		Check				
Full Name of Contributor				**Registration Number, if PAC**				
Mark Waggenbrenner/Waggenbrenner Weinland Park Homes, LLC								
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**	
575 W 1st Ave, Ste 100	Waggenbrenner/President			0 7	0 9	1 2	500.00	
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**				
Columbus	O H	43215		Check				
Full Name of Contributor				**Registration Number, if PAC**				
James S .Stevenson								
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**	
7107 Asheville Park Dr	Northwest Title/President			0 7	0 9	1 2	2,500.00	
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**				
Columbus	O H	43235		Check				
Full Name of Contributor				**Registration Number, if PAC**				
Central Ohio Realtors PAC								
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**	
2700 Airport Dr				0 7	0 9	1 2	2,500.00	
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**				
Columbus	O H	43219		Check				
Full Name of Contributor				**Registration Number, if PAC**				
Robert J. Weiler								
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**	
10 N High St, Ste 401	Robert Weiler Co/Pres			0 7	1 3	1 2	2,500.00	
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**				
Columbus	O H	43215		Check				
Full Name of Contributor				**Registration Number, if PAC**				
Michael S. Schiff								
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**	
400 S Parkview Ave	Self-employed/Real Estate			0 7	2 3	1 2	1,500.00	
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**				
Columbus	O H	43209		Check				
Full Name of Contributor				**Registration Number, if PAC**				
Mark Waggenbrenner/Waggenbrenner Weinland Park Homes, LLC								
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**	
575 W 1st Ave, Ste 100	Waggenbrenner/President			0 7	2 3	1 2	2,000.00	
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**				
Columbus	O H	43215		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 $ 11,750.00