

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

Prescribed by Secretary of State 03/05

Name of Committee in Full						
Re-elect Westcamp Mayor						
Full Name of Contributor Kevin Shannon				Registration Number, if PAC		
Street Address 8575 Winding Creek		Employer/Occupation/Labor Organization*		M	D	Y
				0	7	3
				0	1	5
				Amount \$100.00		
City Pickerington		State OH	Zip Code 43147	Form (Cash, Check, etc.) check		
Full Name of Contributor Thomas Byrne				Registration Number, if PAC		
Street Address 10024 Rockwell Rd.		Employer/Occupation/Labor Organization*		M	D	Y
				0	7	3
				0	1	5
				Amount \$100.00		
City Mt. Sterling		State OH	Zip Code 43143	Form (Cash, Check, etc.) check		
Full Name of Contributor Matthew Roth				Registration Number, if PAC		
Street Address 13184 Brandon Circle		Employer/Occupation/Labor Organization*		M	D	Y
				0	7	3
				0	1	5
				Amount \$150.00		
City Pickerington		State OH	Zip Code 43147	Form (Cash, Check, etc.) check		
Full Name of Contributor Porter Wright Morris and Arthur - Jeff McNealey				Registration Number, if PAC		
Street Address 41 S. High St.		Employer/Occupation/Labor Organization*		M	D	Y
				0	7	3
				0	1	5
				Amount \$100.00		
City Columbus		State OH	Zip Code 43215	Form (Cash, Check, etc.) check		
Full Name of Contributor Samuel Shamansky				Registration Number, if PAC		
Street Address 523 S. Third St.		Employer/Occupation/Labor Organization*		M	D	Y
				0	7	3
				0	1	5
				Amount \$500.00		
City Columbus		State OH	Zip Code 43215	Form (Cash, Check, etc.) check		
Full Name of Contributor Bruce Boyer				Registration Number, if PAC		
Street Address Elm Street		Employer/Occupation/Labor Organization*		M	D	Y
				0	7	3
				0	1	5
				Amount \$100.00		
City Groveport		State OH	Zip Code 43125	Form (Cash, Check, etc.) cash		
Full Name of Contributor Mark Leatherwood				Registration Number, if PAC		
Street Address 309 Main Street		Employer/Occupation/Labor Organization*		M	D	Y
				0	7	3
				0	1	5
				Amount \$100.00		
City Ashville		State OH	Zip Code 43103	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 also 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

\$2,250.00

Total expenditures this event.

\$255.00

\$1,150.00
Page Total S