

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

Prescribed by Secretary of State 3/05

Name of Committee in Full Paula Brooks Committee						
Full Name of Contributor Edwin James Hopple			Registration Number, if PAC			
Street Address 7717 Optimara Dr	Employer/Occupation/Labor Organization*		M	D	Y	Amount
City Pickerington	State OH	Zip Code 43147	07	31	12	\$250.00
			Form (Cash, Check, etc.) Check			
Full Name of Contributor Rhonda B Fraas			Registration Number, if PAC			
Street Address 2378 Kensington Dr	Employer/Occupation/Labor Organization*		M	D	Y	Amount
City Upper Arlington	State OH	Zip Code 43221-3770	08	02	12	\$500.00
			Form (Cash, Check, etc.) Check			
Full Name of Contributor Felix C Wade			Registration Number, if PAC			
Street Address 250 West St	Employer/Occupation/Labor Organization*		M	D	Y	Amount
City Columbus	State OH	Zip Code 43215-7513	07	31	12	\$500.00
			Form (Cash, Check, etc.) Check			
Full Name of Contributor United Steelworkers District 1 PCE			Registration Number, if PAC			
Street Address 777 Dearborn Park Ln	Employer/Occupation/Labor Organization*		M	D	Y	Amount
City Columbus	State OH	Zip Code 43085-5716	07	13	12	\$1,000.00
			Form (Cash, Check, etc.) Check			
Full Name of Contributor James P. Joyce			Registration Number, if PAC			
Street Address 3770 Ridge Mill Dr	Employer/Occupation/Labor Organization*		M	D	Y	Amount
City Hilliard	State OH	Zip Code 43026	07	26	12	\$1,500.00
			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.

\$9,730.00

\$0.00

Page Total \$ 3,750.00
