



Statement of Disposal of Excess Funds and Excess Aggregate Contributions

Form 31-Z
R.C. 3517.109(E), (F)

Full Name of Committee				
To Whom Funds or Asset Given			Date (MM/DD/YYYY)	Value
Street Address		Description of Funds or Asset Given		
City		State	Zip Code	Code*
To Whom Funds or Asset Given			Date (MM/DD/YYYY)	Value
Street Address		Description of Funds or Asset Given		
City		State	Zip Code	Code*
To Whom Funds or Asset Given			Date (MM/DD/YYYY)	Value
Street Address		Description of Funds or Asset Given		
City		State	Zip Code	Code*
To Whom Funds or Asset Given			Date (MM/DD/YYYY)	Value
Street Address		Description of Funds or Asset Given		
City		State	Zip Code	Code*
To Whom Funds or Asset Given			Date (MM/DD/YYYY)	Value
Street Address		Description of Funds or Asset Given		
City		State	Zip Code	Code*

*Codes 1 = OEC Fund 2 = Contributor Refund 3 = 501(c) Corporation

Page Total \$ _____