File Format and Excel Template Instructions

Contributions

On this spreadsheet, indicated on the template provided, you will list campaign contributions. Completion of forms 31-A, 31-A-2, 31-E, 31-J-1, 31-G, 31-T, 31-P and 31-CCwill aide you in completing the template. Samples of reports are included with forms.

Columns on this spreadsheet should be named using the "Data" column on the chart below. The campaign finance forms marked with an X indicate where the required data can be found. For example, a contributor's first name can be found on all eight forms.

CONTRIBUTION LAYOUT											
Column Letter	**Data**	**31 -A**	**31- A-2**	**31 -E**	**31- J-1**	**31 -G**	**31 -T**	**31 -P**	**31 -CC**	**Data Structure**	**Formattin g**
A	First Name (If the contribution is from an individual, the first name is **required**)	X	X	X	X	X	X	X	X	Character, not to exceed 25	
B	Middle Name (If the contribution is from an individual, the middle name if available)	X	X	X	X	X	X	X	X	Character, not to exceed 10	
C	Last Name (If the contribution is from an individual, the last name is **required**)	X	X	X	X	X	X	X	X	Character, not to exceed 60	
D	Suffix (JR, SR, III)	X	X	X	X	X	X	X	X	Character, not to exceed 10	
E	Contributing Entity (If the contribution is not from an individual, the contributing entity.)	X	X	X	X	X	X	X	X	Character, not to exceed 100	
F	PAC Registration Number (If the contributor is a PAC, the PAC Registration Number.)	X	X	X	X			X	X	Character, not to exceed 15	
G	Address (A street address is required, a P.O. Box is not a valid address.)	X	X	X	X	X	X	X	X	Character, not to exceed 50	
H	City	X	X	X	X	X	X	X	X	Character, not to exceed 25	
I	State	X	X	X	X	X	X	X	X	Character, not to exceed 2	US Post Office abbreviatio n

CONTRIBUTION LAYOUT											
Column Letter	**Data**	**31 -A**	**31- A-2**	**31 -E**	**31- J-1**	**31 -G**	**31 -T**	**31 -P**	**31 -CC**	**Data Structure**	**Formatting**
J	Zip	X	X	X	X	X	X	X	X	Character, not to exceed 10	If 10 characters 99999-9999 If 5 characters 99999
K	Employer/Occupation or Labor Organization	X	X	X	X		X	X	X	Character, not to exceed 50	
L	Form of Contribution 1 Cash 2 Check/Money Order 3 Credit Card 4 Electronic Transfer 5 Payroll Deduction	X	X	X					X	Number, 1 digit	
M	Date of the Contributions	X	X	X	X	X	X	X	X	Date	MM/DD/YYYY
N	Amount or Fair Market Value for In-Kind form 31-J-1	X	X	X	X	X	X	X	X	Monetary, not to exceed 10 digits eight digits to the left of the decimal point and two digits to the right of the decimal point	12345678.09
O	Other Income Type		X							Character, not to exceed 5	RE IN SA VO
P	Event Date			X						Date	MM/DD/YYYY
Q	Description				X					Character, not to exceed 60	
R	Received at Fundraising Event (Y/N)				X					Character 1	
S	Name of Creditor							X		Character, not to exceed 50	

CONTRIBUTION LAYOUT											
Column Letter	**Data**	**31 -A**	**31- A-2**	**31 -E**	**31- J-1**	**31 -G**	**31 -T**	**31 -P**	**31 -CC**	**Data Structure**	**Formatting**
T	Amount of Debt Remaining							X		Monetary, not to exceed 10 digits eight digits to the left of the decimal point and two digits to the right of the decimal point	12345678.09
U	This information is no longer required.										
V	Schedule Code (the number and letters in the form number)	31 A	31 A2	31 E	31J 1	31 G	31 T	31 P	**31** -CC	Character not to exceed 5 characters	Use number from forms listed in this row.

FORMS APPENDIX

31-A
R.C. 3517.10

Page _____

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full								
Full Name of Contributor: JOHN GEORGE SMITH, JR.							Registration Number, if PAC:	
Street Address: 123 MAIN ST.	Employer/Occupation/Labor Organization: FILM DIRECTOR						Form (Cash, Check, etc.): CHECK	
City: COLUMBUS	State: OH	Zip Code: 43215	M: 04	D: 14	Y: 01		Amount: $250.00	
Full Name of Contributor: PEOPLE FOR THE ETHICAL TREATMENT OF ANIMALS							Registration Number, if PAC: CP000123456	
Street Address: 345 OAK ST	Employer/Occupation/Labor Organization:						Form (Cash, Check, etc.): CHECK	
City: LOS ANGLES	State: CA	Zip Code: 90812	M: 05	D: 25	Y: 00		Amount: $500.00	

SAMPLE

TEMPLATE_WORKBOOK.XLS

	A	B	C	D	E	F	G	H	I	J
1	FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	CONTRIBUTING ENTITY	PAC REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP
2	JOHN	GEORGE	SMITH	JR			123 MAIN ST.	COLUMBUS	OH	43215
3					PEOPLE FOR THE ETHICAL TREAMENT OF ANIMALS	CP000123456	345 OAK ST.	LOS ANGLES	CA	90812
4										
5										
6										
7										
8										

K	L	M	N	O	P	Q	R	S	T	U	V
EMPLOYER OCCUPATION OR LABOR ORGANIZATION	FORM OF CONTRIBUTION	DATE OF CONTRIBUTION	AMOUNT	OTHER INCOME TYPE	EVENT DATE	INKIND DESCRIPTION	RECEIVED AT FUNDRAISING EVENT	NAME OF CREDITOR	AMOUNT OF DEBT REMAINING	ITEM NUMBER	SCHEDULE CODE
FILM DIRECTOR	2	4/14/01	250.00							1	31A
	2	5/25/00	500.00							2	31A

31-A-2
R.C. 3517.10(B)

Page _____

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full					
Full Name: AMERITECH				Registration Number, if PAC	
Address: 104 N. 4TH ST.	Type*: R E		M: 0 1 D: 3 0 Y: 0 1	Amount: $1.38	
City: COLUMBUS	State: 0 H	Zip Code: 43215	Form(Cash,Check,etc)		

SAMPLE

	A	B	C	D	E	F	G	H	I	J
1	FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	CONTRIBUTING ENTITY	PAC REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP
2	JOHN	GEORGE	SMITH	JR			123 MAIN ST.	COLUMBUS	OH	43215
3					PEOPLE FOR THE ETHICAL TREAMENT OF ANIMALS	CP000123456	345 OAK ST.	LOS ANGLES	CA	90812
4					AMERITECH		104 N. 4TH ST.	COLUMBUS	OH	43215
5										
6										
7										
8										

K	L	M	N	O	P	Q	R	S	T	U	V
EMPLOYER OCCUPATION OR LABOR ORGANIZATION	FORM OF CONTRIBUTION	DATE OF CONTRIBUTION	AMOUNT	OTHER INCOME TYPE	EVENT DATE	INKIND DESCRIPTION	RECEIVED AT FUNDRAISING EVENT	NAME OF CREDITOR	AMOUNT OF DEBT REMAINING	ITEM NUMBER	SCHEDULE CODE
FILM DIRECTOR	2	04/14/2001	250.00							1	31A
	2	05/25/2000	500.00							2	31A
	2	01/30/2001	1.38	RE						3	31A2

31-E

R.C. 3517.10(B)

Event Date 03/15/2001

Page

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full					
Full Name of Contributor: JANE DOE				Registration Number, if PAC	
Street Address: 682 CHERRY ST.	Employer/Occupation/Labor Organization*: HOUSEWIFE		M: 03 D: 15 Y: 01	Amount: $25.00	
City: COLUMBUS	State: OH	Zip Code: 43167	Form(Cash,Check,etc): CASH		

SAMPLE

	A	B	C	D	E	F	G	H	I	J
1	FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	CONTRIBUTING ENTITY	PAC REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP
2	JOHN	GEORGE	SMITH	JR			123 MAIN ST.	COLUMBUS	OH	43215
3					PEOPLE FOR THE ETHICAL TREAMENT OF ANIMALS	CP000123456	345 OAK ST.	LOS ANGLES	CA	90812
4					AMERITECH		104 N. 4TH ST.	COLUMBUS	OH	43215
5	JANE		DOE				682 CHERRY ST	COLUMBUS	OH	43167
6										
7										

K	L	M	N	O	P	Q	R	S	T	U	V
EMPLOYER OCCUPATION OR LABOR ORGANIZATION	FORM OF CONTRIBUTION	DATE OF CONTRIBUTION	AMOUNT	OTHER INCOME TYPE	EVENT DATE	INKIND DESCRIPTION	RECEIVED AT FUNDRAISING EVENT	NAME OF CREDITOR	AMOUNT OF DEBT REMAINING	ITEM NUMBER	SCHEDULE CODE
FILM DIRECTOR	2	04/14/2001	250.00							1	31A
	2	05/25/2000	500.00							2	31A
	2	01/30/2001	1.38							3	31A2
HOUSEWIFE	1	03/15/2001	25.00		03/15/2001					4	31E

31-J-1

R.C. 3517.10

Page _____

In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full						
Full Name of Contributor: GREG BRADY	Employer, Occupation, Labor Organization *: PROGRAMMER		Registration Number, if PAC			
Street Address: 893 WALNUT DR	Description of Item or Service: SOFT DRINKS	M: 10	D: 12	Y: 01	Fair Market Value: $32.67	
City: SPRINGFIELD	State: OH	Zip Code: 45678	Received at Fundraising Event? ☐ YES ☐ NO			

SAMPLE

	A	B	C	D	E	F	G	H	I	J
1	FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	CONTRIBUTING ENTITY	PAC REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP
2	JOHN	GEORGE	SMITH	JR			123 MAIN ST.	COLUMBUS	OH	43215
3					PEOPLE FOR THE ETHICAL TREAMENT OF ANIMALS	CP000123456	345 OAK ST.	LOS ANGLES	CA	90812
4					AMERITECH		104 N. 4TH ST.	COLUMBUS	OH	43215
5	JANE		DOE				682 CHERRY ST	COLUMBUS	OH	43167
6	GREG		BRADY				893 WALNUT ST.	SPRINGFIELD	OH	45678
7										
8										
9										

K	L	M	N	O	P	Q	R	S	T	U	V
EMPLOYER OCCUPATION OR LABOR ORGANIZATION	FORM OF CONTRIBUTION	DATE OF CONTRIBUTION	AMOUNT	OTHER INCOME TYPE	EVENT DATE	INKIND DESCRIPTION	RECEIVED AT FUNDRAISING EVENT	NAME OF CREDITOR	AMOUNT OF DEBT REMAINING	ITEM NUMBER	SCHEDUL CODE
FILM DIRECTOR	2	04/14/2001	250.00							1	31A
	2	05/25/2000	500.00							2	31A
	2	01/30/2001	1.38							3	31A2
HOUSEWIFE	1	03/15/2001	25.00		03/15/2001					4	31E
PROGRAMMER		10/12/2001	32.67			SOFT DRINK				5	31J1

31-G

R.C. 3517.10

Page _____

Contributors in Officeholder's Employ

Prescribed by Secretary of State 2/01

Name of Committee in Full					
Full Name of Contributor SALLY SMITH					
Street Address 875 PINE LANE			M 07	D 28	Y 01	Amount $15.00
City TOLEDO	State OH	Zip Code 46123	Form (Cash, Check, etc) CHECK			

SAMPLE

	A	B	C	D	E	F	G	H	I	J
1	FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	CONTRIBUTING ENTITY	PAC REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP
2	JOHN	GEORGE	SMITH	JR			123 MAIN ST.	COLUMBUS	OH	43215
3					PEOPLE FOR THE ETHICAL TREAMENT OF ANIMALS	CP000123456	345 OAK ST.	LOS ANGLES	CA	90812
4					AMERITECH		104 N. 4TH ST.	COLUMBUS	OH	43215
5	JANE		DOE				682 CHERRY ST	COLUMBUS	OH	43167
6	GREG		BRADY				893 WALNUT ST.	SPRINGFIELD	OH	45678
7	SALLY		SMITH				875 PINE LANE	TOLEDO	OH	46123
8										
9										

K	L	M	N	O	P	Q	R	S	T	U	V
EMPLOYER OCCUPATION OR LABOR ORGANIZATION	FORM OF CONTRIBUTION	DATE OF CONTRIBUTION	AMOUNT	OTHER INCOME TYPE	EVENT DATE	INKIND DESCRIPTION	RECEIVED AT FUNDRAISING EVENT	NAME OF CREDITOR	AMOUNT OF DEBT REMAINING	ITEM NUMBER	SCHEDULE CODE
FILM DIRECTOR	2	04/14/2001	250.00							1	31A
	2	05/25/2000	500.00							2	31A
	2	01/30/2001	1.38	RE						3	31A2
HOUSEWIFE	1	03/15/2001	25.00		03/15/2001					4	31E
PROGRAMMER		10/12/2001	32.67			SOFT DRINK				5	31J1
	2	07/28/2001	15.00							6	31G

Page _____

31-T
R.C. 3517.10(B)

Contributors Doing Business with State Elected Officials

Prescribed by Secretary of State 2/01

Name of Committee in Full					
Full Name of Contributor NEIL MORGAN					
Street Address 640 APPLEWAY	Employer/Occupation/Labor Organization* COMPUTER VENDOR		M D Y 0 3 2 2 0 1	Amount $1,000.00	
City CANTON	State O H	Zip Code 41987	Form(Cash,Check,etc) CREDIT CARD		

SAMPLE

	A	B	C	D	E	F	G	H	I	J
1	FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	CONTRIBUTING ENTITY	PAC REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP
2	JOHN	GEORGE	SMITH	JR			123 MAIN ST.	COLUMBUS	OH	43215
3					PEOPLE FOR THE ETHICAL TREAMENT OF ANIMALS	CP000123456	345 OAK ST.	LOS ANGLES	CA	90812
4					AMERITECH		104 N. 4TH ST.	COLUMBUS	OH	43215
5	JANE		DOE				682 CHERRY ST	COLUMBUS	OH	43167
6	GREG		BRADY				893 WALNUT ST.	SPRINGFIELD	OH	45678
7	SALLY		SMITH				875 PINE LANE	TOLEDO	OH	46123
8	NEIL		MORGAN				649 APPLEWAY	CANTON	OH	41987
9										
10										

	K	L	M	N	O	P	Q	R	S	T	U	V
	EMPLOYER OCCUPATION OR LABOR ORGANIZATION	FORM OF CONTRIBUTION	DATE OF CONTRIBUTION	AMOUNT	OTHER INCOME TYPE	EVENT DATE	INKIND DESCRIPTION	RECEIVED AT FUNDRAISING EVENT	NAME OF CREDITOR	AMOUNT OF DEBT REMAINING	ITEM NUMBER	SCHEDULE CODE
	FILM DIRECTOR	2	04/14/2001	250.00							1	31A
		2	05/25/2000	500.00							2	31A
		2	01/30/2001	1.38	RE						3	31A2
	HOUSEWIFE	1	03/15/2001	25.00		03/15/2001					4	31E
	PROGRAMMER		10/12/2001	32.67			SOFT DRINK				5	31J1
		2	07/28/2001	15.00							6	31G
	COMPUTER VENDOR	3	03/22/2001	1000.00							7	31T

Page _____

31-P
R.C. 3517.108

Contributions for Debt Retirement

Prescribed by Secretary of State 2/01

Name of Committee in Full							
Full Name of Contributor: AMERITECH PAC	Employer/Occupation.Labor Organization*		Registration Number, if PAC: CP0005486				
Street Address: 140 BROAD ST	Name of Creditor: PRINTS AMERICA		Enter date of Contribution below			Amount: 500.00	
City: COLUMBUS	State: OH	Zip Code: 43215	M: 01	D: 10	Y: 01	Amount Debt Remaining: 500.00	

SAMPLE

	A	B	C	D	E	F	G	H	I	J
1	FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	CONTRIBUTING ENTITY	PAC REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP
2	JOHN	GEORGE	SMITH	JR			123 MAIN ST.	COLUMBUS	OH	43215
3					PEOPLE FOR THE ETHICAL TREAMENT OF ANIMALS	CP000123456	345 OAK ST.	LOS ANGLES	CA	90812
4					AMERITECH		104 N. 4TH ST.	COLUMBUS	OH	43215
5	JANE		DOE				682 CHERRY ST	COLUMBUS	OH	43167
6	GREG		BRADY				893 WALNUT ST.	SPRINGFIELD	OH	45678
7	SALLY		SMITH				875 PINE LANE	TOLEDO	OH	46123
8	NEIL		MORGAN				649 APPLEWAY	CANTON	OH	41987
9					AMERITECH PAC	CP0005486	140 BROAD ST	COLUMBUS	OH	43215
10										
11										

K	L	M	N	O	P	Q	R	S	T	U	V
EMPLOYER OCCUPATION OR LABOR ORGANIZATION	FORM OF CONTRIBUTION	DATE OF CONTRIBUTION	AMOUNT	OTHER INCOME TYPE	EVENT DATE	INKIND DESCRIPTION	RECEIVED AT FUNDRAISING EVENT	NAME OF CREDITOR	AMOUNT OF DEBT REMAINING	ITEM NUMBER	SCHEDULE CODE
FILM DIRECTOR	2	04/14/2001	250.00							1	31A
	2	05/25/2000	500.00							2	31A
	2	01/30/2001	1.38	RE						3	31A2
HOUSEWIFE	1	03/15/2001	25.00		03/15/2001					4	31E
PROGRAMMER		10/12/2001	32.67			SOFT DRINK				5	31J1
	2	07/28/2001	15.00							6	31G
COMPUTER VENDOR	3	03/22/2001	1000.00							7	31T
		01/10/2001	500.00					PRINTS AMERICA	500	8	31P