

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Gibbs 4 Kids Committee</b>				
Full Name of Contributor <b>Veda Nami</b>			Registration Number, if PAC	
Street Address <b>7271 Laudon Lane</b>	Employer/Occupation/Labor Organization* <b>Retired</b>		M   D   Y <b>1   0   1   1   0   7</b>	Amount <b>\$100.00</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	Form (Cash, Check, etc.) <b>Cash</b>	
Full Name of Contributor <b>Kelly S Kaser</b>			Registration Number, if PAC	
Street Address <b>65 Jefferson Avenue</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>1   0   1   1   0   7</b>	Amount <b>\$30.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Cash</b>	
Full Name of Contributor <b>Clarence Simmons</b>			Registration Number, if PAC	
Street Address <b>185 S. Fifth Street</b>	Employer/Occupation/Labor Organization* <b>Housing Trust</b>		M   D   Y <b>1   0   1   1   0   7</b>	Amount <b>\$30.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Cash</b>	
Full Name of Contributor <b>Michael Spencer</b>			Registration Number, if PAC	
Street Address <b>939 Roberson Street</b>	Employer/Occupation/Labor Organization* <b>Kegler Brown</b>		M   D   Y <b>1   0   1   1   0   7</b>	Amount <b>\$40.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43201</b>	Form (Cash, Check, etc.) <b>Cash</b>	
Full Name of Contributor <b>Egyptian Eye</b>			Registration Number, if PAC	
Street Address <b>6467 Dorset Lane</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>1   0   1   1   0   7</b>	Amount <b>\$30.00</b>
City <b>Solon</b>	State <b>OH</b>	Zip Code <b>44139</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Angel Harris</b>			Registration Number, if PAC	
Street Address <b>7895 Grandlin Park Court</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>1   0   1   1   0   7</b>	Amount <b>\$30.00</b>
City <b>Blacklick</b>	State <b>OH</b>	Zip Code <b>43004</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Laurel Beatty</b>			Registration Number, if PAC	
Street Address <b>268 E. Gates Street</b>	Employer/Occupation/Labor Organization* <b>Secretary of State</b>		M   D   Y <b>1   0   1   1   0   7</b>	Amount <b>\$50.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Form (Cash, Check, etc.) <b>Check</b>	

\* 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

**\$955.00**

Total expenditures this event.

**\$0.00**Page Total \$ **\$310.00**