31-E R.C. 3517.10(B)

Event Date	3/11/09
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Statement of Contributions Received at a Social or Fundraising Event

	Prescribed by Sec	retary of State 3/05			
Name of Committee in Full					
KAMBON.EDU					
Full Name of Contributor			Registration Number, if PAC		
NANCY R WINFIELD	· · · · · · · · · · · · · · · · · · ·				
Street Address	Employer/Occupa	tion/Labor Organization*	M D Y Amount	20.00	
1638 ROSE VIEW DR		1	0 3 1 1 0 9	20.00	
City	State	Zip Code	Form(Cash,Check,etc)		
COLUMBUS	$O \mid H$	43209	CHECK		
Full Name of Contributor			Registration Number, if PAC		
CARTER D WOMACK	1 5 y 40	7.7.1.0			
Street Address	Employer/Occupa	ntion/Labor Organization*	M D Y Amount	20.00	
1291 WEDGEFIELD LN		Is: o I	0 3 1 1 0 9	20.00	
City	State	Zip Code	Form(Cash,Check,etc)		
NEW ALBANY	OH	43054	CHECK		
Full Name of Contributor			Registration Number, if PAC		
BARBARA A WOOD	IF 1 (0		M D V Manager		
Street Address	Employer/Occupa	ntion/Labor Organization*	M D Y Amount	15.00	
1428 WAYLAND DRIVE	0. (12: 0.1	0 3 1 1 0 9 Form(Cash,Check,etc)	15.00	
Cottinder	State H	Zip Code 43207	CHECK		
COLUMBUS		J 43207	Registration Number, if PAC		
Full Name of Contributor			Registration Number, if PAC		
LESTER WRIGHT			N D V		
Street Address	Employer/Occupa	ation/Labor Organization*	M D Y Amount	25.00	
2268 LISTON AVE	Contra	7: C. J.	0 3 1 1 0 9 Form(Cash,Check,etc)	23.00	
City	State	Zip Code 43207	CHECK		
COLUMBUS		43207			
Full Name of Contributor Registration Number, if PAC					
ARDELIA L YOUNG Street Address	Translavar/Occurs	ation/Labor Organization*	M D Y Amount		
4	Employer/Occupa	ation/Labor Organization	0 3 1 1 0 9	20.00	
5776 BLENDONBROOK LN	State	Zip Code	Form(Cash.Check,etc)	20.00	
COLUMBUS	OH	43230	CHECK		
		43230	Registration Number, if PAC		
Full Name of Contributor MARSHALL H ZIGLAR Registration Number, if PAC					
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount		
96 S GOULD RD	Employer/Occup	atton/Labor Organization	0 3 1 1 0 9	30.00	
City	State	Zip Code	Form(Cash,Check,etc)	30.00	
COLUMBUS	o H	43209	CHECK		
		43207	Registration Number, if PAC		
JESSE L JACKSON Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount		
	Employer/Occup	attom Laudi Organization	0 3 1 1 0 9	50.00	
2120 GLENBROOK DR	State	Zip Code	Form(Cash,Check,etc)	50.00	
COLUMBUS		43232	CHECK		
COLUMBOS		10404	CILCA		

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	
		Page Total \$180.00
L		

^{*} 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)]