

Sheet1

FIRST NAME	MIDDLE NAME	LAST NAME	SUFFIX	CONTRIBUTING ENTITY	PAC REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP	DATE OF CONTRIBUTION	AMOUNT	EVENT DATE	IN KIND DESCRIPTION	SCHEDULE CODE
Marilynn		Stephens				857 S 5th Street	Columbus	OH	43206	8/10/2014	\$30.96	09/04/14	Event Supplies	31J1
Marilynn		Stephens				857 S 5th Street	Columbus	OH	43206	8/29/2014	\$160.09	09/04/14	Event Food & Beverage	31J1
Marilynn		Stephens				857 S 5th Street	Columbus	OH	43206	8/29/2014	\$21.48	09/04/14	Event Prize	31J1
Marilynn		Stephens				857 S 5th Street	Columbus	OH	43206	9/2/2014	\$25.48	09/04/14	Event Supplies	31J1
Marilynn		Stephens				857 S 5th Street	Columbus	OH	43206	9/3/2014	\$7.51	9/4/2014	Event Prize	31J1
Marilynn		Stephens				857 S 5th Street	Columbus	OH	43206	9/3/2014	\$32.37	9/4/2014	Event Food	31J1

\$277.89