

Event Date 3/19/2009

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# Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full <b>Friends of McGivern</b>					
Full Name of Contributor <b>Ann T. Gallagher</b>				Registration Number, if PAC	
Street Address <b>8357 Breckenridge Way</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43235</b>	Amount <b>150.00</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>William E. Stilson</b>				Registration Number, if PAC	
Street Address <b>355 E. Campus View Blvd., Suite 250</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43235</b>	Amount <b>125.00</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Mary Schell Winters</b>				Registration Number, if PAC	
Street Address <b>1204 Millcreek Lane</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43220</b>	Amount <b>100.00</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Karen L. Gillmor</b>				Registration Number, if PAC	
Street Address <b>514 Hedegate North Court</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1</b>
City <b>Tiffin</b>	State <b>O</b>	Zip Code <b>44883</b>	Amount <b>100.00</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>David M. Snow</b>				Registration Number, if PAC	
Street Address <b>730 Nordale Avenue</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1</b>
City <b>Dayton</b>	State <b>O</b>	Zip Code <b>45420</b>	Amount <b>100.00</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Gary C. Suhadolnik</b>				Registration Number, if PAC	
Street Address <b>15046 Forestwood Drive</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1</b>
City <b>Strongsville</b>	State <b>O</b>	Zip Code <b>44149</b>	Amount <b>100.00</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Trixie L. Hyser</b>				Registration Number, if PAC	
Street Address <b>5858 Medallion Drive, E.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1</b>
City <b>Westerville</b>	State <b>O</b>	Zip Code <b>43082</b>	Amount <b>100.00</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, occupation 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)]

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 \$ 775.00