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| Event Date | <u>3-12-15</u> |
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

| | | | | | |
|---|---|-------------------------------|---|-----------------------------|------------------------|
| Name of Committee in Full The Committee to Elect Jennifer Price | | | | | |
| Full Name of Contributor Leon Hughes Jr. | | | | Registration Number, if PAC | |
| Street Address 5535 Naiche Road | Employer/Occupation/Labor Organization* | | M 0 | D 3 | Y 15 |
| City Columbus | State OH | Zip Code 43213-3508 | Form (Cash, Check, etc) check | | Amount 25.00 |
| Full Name of Contributor Jody Dickson | | | | Registration Number, if PAC | |
| Street Address 322 Highmeadow Ct. | Employer/Occupation/Labor Organization* United Airlines | | M 0 | D 3 | Y 15 |
| City Gahanna | State OH | Zip Code 43230 | Form (Cash, Check, etc) check | | Amount 25.00 |
| Full Name of Contributor Danielle Piccione | | | | Registration Number, if PAC | |
| Street Address 3877 Preserve Crossing Blvd | Employer/Occupation/Labor Organization* L-Brands | | M 0 | D 3 | Y 15 |
| City Columbus | State OH | Zip Code 43230 | Form (Cash, Check, etc) check | | Amount 25.00 |
| Full Name of Contributor Olga M. Hesch | | | | Registration Number, if PAC | |
| Street Address 7260 Refugee Road | Employer/Occupation/Labor Organization* | | M 0 | D 3 | Y 15 |
| City Pickerington | State OH | Zip Code 43147 | Form (Cash, Check, etc) check | | Amount 25.00 |
| Full Name of Contributor John Henry | | | | Registration Number, if PAC | |
| Street Address 2590 South State Rt. 605 | Employer/Occupation/Labor Organization* self-employed | | M 0 | D 3 | Y 15 |
| City Galena | State OH | Zip Code 43021 | Form (Cash, Check, etc) cash | | Amount 50.00 |
| Full Name of Contributor Scott Wade | | | | Registration Number, if PAC | |
| Street Address 7456 Fallsview Circle | Employer/Occupation/Labor Organization* | | M 0 | D 3 | Y 15 |
| City Delaware | State OH | Zip Code 43015 | Form (Cash, Check, etc) | | Amount 50.00 |
| Full Name of Contributor Jeff Tisone | | | | Registration Number, if PAC | |
| Street Address 10171 Choctaw Dr. | Employer/Occupation/Labor Organization* Ohio Basement Authority | | M 0 | D 3 | Y 15 |
| City Canal Winchester | State OH | Zip Code 43110 | Form (Cash, Check, etc) | | Amount 30.00 |

* 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)]

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

1,005.00

Total expenditures this event

0

Page Total \$ 230.00