

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Committee to Elect Andrea Peebles for Judge</b>						
Full Name of Contributor <b>Kelly O'Reilly Anzelmo</b>			Registration Number, if PAC			
Street Address <b>446 Howland Drive</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>	Y <b>23</b>	Amount <b>35.00</b>
City <b>Gahanna</b>	State <b>OH</b>	Zip Code <b>43230</b>	Form (Cash, Check, etc) <b>check</b>			
Full Name of Contributor <b>Greg Wehrer</b>			Registration Number, if PAC			
Street Address <b>514 W 3rd Ave</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>	Y <b>23</b>	Amount <b>35.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43201</b>	Form (Cash, Check, etc) <b>check</b>			
Full Name of Contributor <b>Cara C. Orr</b>			Registration Number, if PAC			
Street Address <b>139 Westview Avenue</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>	Y <b>23</b>	Amount <b>35.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43214</b>	Form (Cash, Check, etc) <b>check</b>			
Full Name of Contributor <b>Jennifer S. Thompson, Attorney at Law</b>			Registration Number, if PAC			
Street Address <b>7482 Vista Lake Way</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>	Y <b>23</b>	Amount <b>35.00</b>
City <b>Powell</b>	State <b>OH</b>	Zip Code <b>43065</b>	Form (Cash, Check, etc) <b>check</b>			
Full Name of Contributor <b>The Brunner Firm Co., LPA</b>			Registration Number, if PAC			
Street Address <b>545 East Town Street</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>1</b>	Y <b>1</b>	Amount <b>35.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc) <b>Check</b>			
Full Name of Contributor <b>Ira B Sully Attorney at Law</b>			Registration Number, if PAC			
Street Address <b>844 South Front Street</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>	Y <b>23</b>	Amount <b>17.50</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Form (Cash, Check, etc) <b>check</b>			
Full Name of Contributor <b>Natalie Trishman</b>			Registration Number, if PAC			
Street Address <b>110 N Third St. Unit 204</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>	Y <b>23</b>	Amount <b>25.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</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 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 \$ 182.50