

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Kevin L. Boyce For Columbus City Council Committee</b>					
Full Name of Contributor <b>Michael McCord</b>				Registration Number, if PAC	
Street Address <b>786 South Front Street</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>42315</b>	Y <b>1</b>	Amount <b>100</b>
Form (Cash, Check, etc.) <b>cash</b>					
Full Name of Contributor <b>Janelle N. Simmons</b>				Registration Number, if PAC	
Street Address <b>2686 Bloom Drive</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43219</b>	Y <b>1</b>	Amount <b>100</b>
Form (Cash, Check, etc.) <b>check</b>					
Full Name of Contributor <b>Yvette Austin-Palmer</b>				Registration Number, if PAC	
Street Address <b>5723 Willowcreek Cir.</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>42313</b>	Y <b>1</b>	Amount <b>200</b>
Form (Cash, Check, etc.) <b>check</b>					
Full Name of Contributor <b>David Wiles</b>				Registration Number, if PAC	
Street Address <b>7615 Sharah Lee</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>
City <b>Concord Township</b>		State <b>OH</b>	Zip Code <b>44077</b>	Y <b>1</b>	Amount <b>250</b>
Form (Cash, Check, etc.) <b>check</b>					
Full Name of Contributor <b>Christie Angel</b>				Registration Number, if PAC	
Street Address <b>600 South Grant Ave</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43206</b>	Y <b>1</b>	Amount <b>100</b>
Form (Cash, Check, etc.) <b>check</b>					
Full Name of Contributor <b>Derrick R. Clay</b>				Registration Number, if PAC	
Street Address <b>7717 Early Measows Road</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>
City <b>Westerville</b>		State <b>OH</b>	Zip Code <b>43082</b>	Y <b>1</b>	Amount <b>100</b>
Form (Cash, Check, etc.) <b>check</b>					
Full Name of Contributor <b>Rachel M. Milella</b>				Registration Number, if PAC	
Street Address <b>413 Reinhard Ave.</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43206</b>	Y <b>1</b>	Amount <b>100</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 also 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

**\$0.00**

Total expenditures this event.

**\$0.00**

Page Total \$ **\$950**