

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee For Judge Patsy A. Thomas							
Full Name of Contributor Michael Council					Registration Number, if PAC		
Street Address 108 Buttles Ave.	Employer/Occupation/Labor Organization* Real Estate/Self Employed		M 0	D 8	Y 3	Amount 200.00	
City Columbus	State O	Zip Code H 43215	Form(Cash,Check,etc) check				
Full Name of Contributor Marty Anderson					Registration Number, if PAC		
Street Address 3409 River Seine Street	Employer/Occupation/Labor Organization* 		M 0	D 8	Y 3	Amount 200.00	
City Columbus	State O	Zip Code H 43221	Form(Cash,Check,etc) check				
Full Name of Contributor Frederick L. Ransier III					Registration Number, if PAC		
Street Address 1801 East Long Street	Employer/Occupation/Labor Organization* Vorys Sater Semour & Peas		M 0	D 8	Y 3	Amount 200.00	
City Columbus	State O	Zip Code H 43203	Form(Cash,Check,etc) check				
Full Name of Contributor Kathleen H. Ransier					Registration Number, if PAC		
Street Address 1801 East Long Street	Employer/Occupation/Labor Organization* Vorys Sater Semour & Peas		M 0	D 8	Y 3	Amount 200.00	
City Columbus	State O	Zip Code H 43203	Form(Cash,Check,etc) check				
Full Name of Contributor John J. Kulewicz					Registration Number, if PAC		
Street Address 2104 Yorkshire Road	Employer/Occupation/Labor Organization* Vorys Sater Semour & Peas		M 0	D 8	Y 3	Amount 200.00	
City Columbus	State O	Zip Code H 43221	Form(Cash,Check,etc) check				
Full Name of Contributor Carl D. Smallwood					Registration Number, if PAC		
Street Address 4121 Edgehill Drive	Employer/Occupation/Labor Organization* Vorys Sater Semour & Peas		M 0	D 8	Y 3	Amount 200.00	
City Columbus	State O	Zip Code H 43220	Form(Cash,Check,etc) check				
Full Name of Contributor Douglas L. Rogers					Registration Number, if PAC		
Street Address 2516 Shewin Road	Employer/Occupation/Labor Organization* Vorys Sater Semour & Peas		M 0	D 8	Y 3	Amount 200.00	
City Columbus	State O	Zip Code H 43221	Form(Cash,Check,etc) check				

* 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 \$ 1,400.00