

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

Prescribed by Secretary of State 03/05

Name of Committee in Full PALEY FOR COLUMBUS					
Full Name of Contributor Andrew O. Eribo				Registration Number, if PAC	
Street Address 7165 Biddick Court		Employer/Occupation/Labor Organization* Ridway Eng Group Inc		M 0	D 6
City New Albany		State OH	Zip Code 43054	Y 1	Amount \$100.00
Form (Cash, Check, etc.) ck					
Full Name of Contributor Jerome J. Madigan				Registration Number, if PAC	
Street Address 566 S. Fourth St.		Employer/Occupation/Labor Organization* ATTY - SELF		M 0	D 6
City Columbus		State OH	Zip Code 43206	Y 1	Amount \$250.00
Form (Cash, Check, etc.) ck					
Full Name of Contributor CMAGE/CWA Local				Registration Number, if PAC	
Street Address 1350 W. Fifth Ave. 300		Employer/Occupation/Labor Organization* PAC		M 0	D 6
City Columbus		State OH	Zip Code 43212	Y 1	Amount \$250.00
Form (Cash, Check, etc.) ck					
Full Name of Contributor Connie Klema				Registration Number, if PAC	
Street Address P.O. Box 991 - 100 ZELLERS LN.		Employer/Occupation/Labor Organization* ATTY		M 0	D 6
City Pataskala		State OH	Zip Code 43062	Y 1	Amount \$100.00
Form (Cash, Check, etc.) ck					
Full Name of Contributor Philip Rasor				Registration Number, if PAC	
Street Address 4265 Reedbury Ln		Employer/Occupation/Labor Organization* RW ARMSTRONG - VP		M 0	D 6
City Columbus		State OH	Zip Code 43220	Y 1	Amount \$100.00
Form (Cash, Check, etc.) ck					
Full Name of Contributor Mehmet Tin				Registration Number, if PAC	
Street Address 2597 Coltsbridge Dr.		Employer/Occupation/Labor Organization* STANTEC CONSULT GROUP		M 0	D 6
City Lewis Center		State OH	Zip Code 43035	Y 1	Amount \$150.00
Form (Cash, Check, etc.) ck					
Full Name of Contributor Tobias Iloka				Registration Number, if PAC	
Street Address Run Dr.		Employer/Occupation/Labor Organization* DYNOTEC, INC.		M 0	D 6
City Westerville		State OH	Zip Code 43082	Y 1	Amount \$300.00
Form (Cash, Check, etc.) ck					

* 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 \$ **\$1,250.00**