31-E R.C. 3517.10(B)

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date	5/14/09
Page 3	***************************************

\$480.00

Page Total \$

Name of Committee in Full Paley for Columbus							
Full Name of Contributor					Registration Number, if PAC		
Janet Grubb							
Street Address	1. 1	Employer/Occupati	M D		Amount \$50.00		
4062 Georgesville Wrig	htsville Rd.	MUNI COURT - JUNGE		0 5 1 Form (Cash,	4 0 9	\$50.00	
City Grove City		OH	Zip Code /	check	CHECK, etc.)		
Full Name of Contributor					Registration Number, if PAC		
Donald Hallowes							
Street Address	***************************************	Employer/Occupati	M D	Y	Amount		
252 Kingsmeadow Ln.		HALLOWES + AllEN - Atty State Zip Code		Ty 0 5 1			
City			Zip Code	Form (Cash,	Check, etc.)		
Blacklick		OH	43004	check			
Full Name of Contributor				Registration	Number, if P.	AC	
Bill Hedrick				- K 1 5	<u> </u>	Amount	
Street Address		Employer/Occupation/Labor Organization*		0 5 1	4 0 9	\$100.00	
535 West First Ave.		City of	Zip Code	Form (Cash,	1 1 1	ψ100.00	
City Columbus		OH	43215	check	,		
Full Name of Contributor) Ori		Registration	Number, if P.	AC	
C, Edward & Sandra Horn							
Street Address	***************************************	Employer/Occupation/Labor Organization*		M I	Y	Amount	
378 Charmel Pl.		M CO WA INT. D	N P/EAS- ATT Zip Code	0 5 1	4 0 9	\$30.00	
City	***************************************	Sta te	Zip Code	Form (Cash,	Check, etc.)		
Columbus		ОН	43235	check			
Full Name of Contributor	· C			Registration	n Number, if P	PAC	
Street Address	1				D Y	Amount	
1795 Edgemont Rd.		Employer/Occupation/Labor Organization*		10 - 14	4 0 9	\$50.00	
City		State	Zip Code	Form (Cash.	, Check, etc.)		
Columbus		ОН	43212	check			
Full Name of Contributor				Registration	n Number, if I	PAC	
Jo Kaiser							
Street Address		Employer/Occupation/Labor Organization*			D Y 4 0 9	Amount \$100.00	
389 Library Ct.			Atty	1 1 1		φ100.00	
City		Stal te OH	Zip Code 43215	Form (Cash check	, Check, etc.)		
Columbus		OH 140210		Panistratio	Registration Number, if PAC		
Full Name of Contributor Donald & Renee Kies /	LOE			Registratio	n Number, n	iac	
Street Address	was a superior of the superior	Employer/Occups	tion// shor Organization*	ian) M	D Y	Amount	
225 E. North Broadway	√ St.	Employer/Occupation/Labor Organization* WN 1010		<i>- p</i> −00 1 € \$: 4~ 1 ° 8	4 0 9	\$50.00	
City		Sta te			, Check, etc.)		
Columbus		ОН	43214	check			
the individual's business, if an	om individuals over \$100 to statew y, rather than employer should be li e employees are members, if any, n	sted. If two or more	employees contribute via pa	utor is self-emplo yroll deduction ar	yed, the occurred the	upation and the name o e aggregate of \$100, the	
Fill in the boxes below only on Transfer the Total contributions in the date column	the last page for this event, for this event to form No. 31-A. Un	nder Fulf Name of C	Contributor state "Contribution	ons from form No	. 31-E" and	list the date of the ever	
Total contributions this event		Total expenditures this event.					
\$0.00			\$0.00			ቀ ለ	