

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

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Leeseberg</b>							
Full Name of Contributor <b>Tom Wester</b>					Registration Number, if PAC		
Street Address <b>888 Ludwig Dr</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	4	1	50.00
City <b>Gahanna</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43230</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Tom &amp; Laura Yost</b>					Registration Number, if PAC		
Street Address <b>376 Beecher Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	4	1	50.00
City <b>Gahanna</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43230</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Thomas Weber</b>					Registration Number, if PAC		
Street Address <b>444 Tresham Court</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	4	1	75.00
City <b>Gahanna</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43230</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Thomas Falzone</b>					Registration Number, if PAC		
Street Address <b>723 Cherry Wood Place</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	4	1	100.00
City <b>Gahanna</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43230</b>	Form(Cash,Check,etc) <b>Cash</b>			
Full Name of Contributor <b>Scott &amp; Cyndi Abdon</b>					Registration Number, if PAC		
Street Address <b>144 N. Gould Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	4	1	100.00
City <b>Columbus</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43209</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Michael Tamarkin</b>					Registration Number, if PAC		
Street Address <b>1320 Penderson Court</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	4	1	50.00
City <b>New Albany</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43054</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Shane Ewald</b>					Registration Number, if PAC		
Street Address <b>126 Walnut St</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	4	1	100.00
City <b>Gahanna</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43230</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  

1,300.00

Total expenditures this event  

195.23

Page Total \$ 525.00