

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

Prescribed by Secretary of State 03/05

Name of Committee in Full				Registration Number, if PAC			
Paley for Columbus							
Full Name of Contributor				Amount			
Rockey Kerns				\$100.00			
Street Address		Employer/Occupation/Labor Organization*		M		D	
467 Waterbury Ct.		ROCKEY KERN'S PHOTOGRAPHY		1		0	
City		State		Y		9	
Gahanna		OH		43230		check	
Full Name of Contributor				Registration Number, if PAC			
Robert & Christine Kowalczyk							
Street Address		Employer/Occupation/Labor Organization*		M		D	
8393 Kingsley Dr.		SELF - CHIROPRACTOR		1		0	
City		State		Y		9	
Reynoldsburg		OH		43068		check	
Full Name of Contributor				Registration Number, if PAC			
Joe Landusky							
Street Address		Employer/Occupation/Labor Organization*		M		D	
901 S. High St.		SELF - ATTY		1		0	
City		State		Y		9	
Columbus		OH		43215		cash	
Full Name of Contributor				Registration Number, if PAC			
Donald Leach, Jr.							
Street Address		Employer/Occupation/Labor Organization*		M		D	
191 W. Nationwide Blvd. Ste 300		DENSMORE & ATTY		1		0	
City		State		Y		9	
Columbus		OH		43215		check	
Full Name of Contributor				Registration Number, if PAC			
John Logan & Mary Duffey							
Street Address		Employer/Occupation/Labor Organization*		M		D	
4740 Hayden Run Rd.		PECK SHAFER & WMS		1		0	
City		State		Y		9	
Columbus		OH		43221		check	
Full Name of Contributor				Registration Number, if PAC			
Michael McElligott							
Street Address		Employer/Occupation/Labor Organization*		M		D	
511 E. Jeffrey Pl.		SELF		1		0	
City		State		Y		9	
Columbus		OH		43214		check	
Full Name of Contributor				Registration Number, if PAC			
Lindsay Mentel							
Street Address		Employer/Occupation/Labor Organization*		M		D	
58 N. Fourth St.		BEXLEY City Schools		1		0	
City		State		Y		9	
Columbus		OH		43215		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 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 \$ \$600.00