

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

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>The Committee to Elect Andrew English</b>						Registration Number, if PAC	
Full Name of Contributor <b>Steve Hadden</b>						M D Y Amount	
Street Address <b>1536 Newcomer Rd.</b>		Employer/Occupation/Labor Organization*		0 9 1 7 0 9		25.00	
City <b>Columbus</b>		State <input type="radio"/> O <input type="radio"/> H Zip Code <b>43235</b>		Form(Cash,Check,etc) <b>Cash</b>			
Full Name of Contributor <b>Geof &amp; Allison Hatcher</b>						Registration Number, if PAC	
Street Address <b>1013 Clubview Blvd. S.</b>		Employer/Occupation/Labor Organization*		M D Y Amount			
City <b>Columbus</b>		State <input type="radio"/> O <input type="radio"/> H Zip Code <b>43235</b>		0 9 1 7 0 9		50.00	
				Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Paul Hedges</b>						Registration Number, if PAC	
Street Address <b>1411 Clubview Blvd. N</b>		Employer/Occupation/Labor Organization*		M D Y Amount			
City <b>Columbus</b>		State <input type="radio"/> O <input type="radio"/> H Zip Code <b>43235</b>		0 9 1 7 0 9		25.00	
				Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Meredith Hoag</b>						Registration Number, if PAC	
Street Address <b>1390 Oakbourne Dr.</b>		Employer/Occupation/Labor Organization*		M D Y Amount			
City <b>Columbus</b>		State <input type="radio"/> O <input type="radio"/> H Zip Code <b>43235</b>		0 9 1 7 0 9		40.00	
				Form(Cash,Check,etc) <b>Cash</b>			
Full Name of Contributor <b>Edward &amp; Katherine Kline</b>						Registration Number, if PAC	
Street Address <b>1546 Clubview Blvd. S.</b>		Employer/Occupation/Labor Organization*		M D Y Amount			
City <b>Columbus</b>		State <input type="radio"/> O <input type="radio"/> H Zip Code <b>43235</b>		0 9 1 7 0 9		50.00	
				Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Lezlee LeVette</b>						Registration Number, if PAC	
Street Address <b>1340 Clubview Blvd. N</b>		Employer/Occupation/Labor Organization*		M D Y Amount			
City <b>Columbus</b>		State <input type="radio"/> O <input type="radio"/> H Zip Code <b>43235</b>		0 9 1 7 0 9		25.00	
				Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Ernest Neal</b>						Registration Number, if PAC	
Street Address <b>1472 Park Ridge Dr.</b>		Employer/Occupation/Labor Organization*		M D Y Amount			
City <b>Columbus</b>		State <input type="radio"/> O <input type="radio"/> H Zip Code <b>43235</b>		0 9 1 7 0 9		25.00	
				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

880.00

Total expenditures this event

0.00

Page Total \$ 240.00