

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 James Linthicum				Registration Number, if PAC	
Street Address 8760 Stoneridge	Employer/Occupation/Labor Organization* URS Engineer		M 0	D 6	Y 0110
City Pickerington	State OH	Zip Code 43147	Form (Cash, Check, etc.) ck		Amount \$250.00
Full Name of Contributor Richard Ryan				Registration Number, if PAC	
Street Address 9725 Camarillo	Employer/Occupation/Labor Organization* URS Engineering		M 0	D 6	Y 0810
City Plain City	State OH	Zip Code 43064	Form (Cash, Check, etc.) money order		Amount \$250.00
Full Name of Contributor John Kennedy				Registration Number, if PAC	
Street Address 500 S. Front Street	Employer/Occupation/Labor Organization* Crabbe, Brown & James		M 0	D 6	Y 0410
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) ck		Amount \$1,000.00
Full Name of Contributor Marguerite H. Turnbull				Registration Number, if PAC	
Street Address 590 Knightsbridge Blvd #24	Employer/Occupation/Labor Organization* Retired		M 0	D 6	Y 0110
City Columbus	State OH	Zip Code 43214	Form (Cash, Check, etc.) ck		Amount \$50.00
Full Name of Contributor Robert E. Flacone				Registration Number, if PAC	
Street Address 150 E. Lafayette	Employer/Occupation/Labor Organization* MD		M 0	D 5	Y 2910
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) ck		Amount \$100.00
Full Name of Contributor Dan Glosser				Registration Number, if PAC	
Street Address 6238 County Road 102	Employer/Occupation/Labor Organization* Crawford, Murphy, Tilly/En		M 7	D 6	Y 1510
City Mt. Gilead	State OH	Zip Code 43338	Form (Cash, Check, etc.) money order		Amount \$100.00
Full Name of Contributor Jeffrey L. Brown				Registration Number, if PAC	
Street Address 37 W. Broad Street Ste 725	Employer/Occupation/Labor Organization* Smith & Hale LLC/Atty		M 0	D 6	Y 1010
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) ck		Amount \$500.00

* 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 \$ **\$2,250.00**