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

Event Date 09/03/07
Page _____

Prescribed by Secretary of State 03/05

Name of Committee in Full				
FRIENDS TO ELE	Cot P	ERKINS		
Full Name of Contributor RONGLO Williams			Registration Number, if PAC	
Street Address Dave Drive	Employer/Occupation/Labor Organization* LL LL LOUN		0923	
Columbus	Sta te OH	Zip Code 43230	Form (Cash, Che	ck.ek.) 15
Full Name of Contributor Welner Price			Registration Number, if PAC	
Street Address 2656 Mitzi Dr.	Lealki	on/Labor Organization*	69 24	Amgunt 0000
Columbus	Sta te OH	Zip Code 43009 .	Form (Cash, Che	4
Full Name of Contributor NIAUK HE 1			Registration Nu	
Street Address 5634 Chreshen Ace.	Employer/Occupation/Labor Organization* UNEMPLOYEE Sta te Zip Code		0923	Amount 47
city Columbus	Sta te OH	Zip Code 7 43030		ck, etc.)
Full Name of Contributor JOYCE Smith			Registration Nu	
Stront Address	Employer/Occupation/Labor Organization* Cleurch Administrator		(O O 1	SO CO
1756 H. Star Rd City Collembus Okeo	Sta te OH	Zip Code 432(2	Form (Cash, Che	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation	on/Labor Organization*	M D	Y Amount
City	Sta te OH	Zip Code	Form (Cash, Check, etc.)	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupati	on/Labor Organization*	M D	Y Amount
City	Sta te OH	Zip Code	Form (Cash, Che	
Full Name of Contributor			Registration Nu	mber, if PAC
Street Address	Employer/Occupation/Labor Organization*		M D	Y Amount
City	Sta te OH	Zip Code	Form (Cash, Check, etc.)	
* Required for contributions from individuals over \$100 to statewide	e and General Asse	mbly candidates. If contributor i	s self-employed,	the occupation and the name of

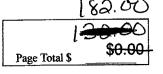
Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from No. 31-E" and list the date of the event in the date column

Total	contributions this event
	732 00
	\$0.00

Total expenditures this event.

\$0.00



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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)]