

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <u>Committee to Elect Andrea Peebles for Judge</u>				
Full Name of Contributor <u>Sherri Lynn Gaffey</u>			Registration Number, if PAC	
Street Address <u>4790 E. Livingston</u>	Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>6</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43227</u>	Y <u>05</u>	Amount <u>10.00</u>
Form(Cash, Check, etc) <u>Cash</u>				
Full Name of Contributor <u>Greg Wehrer</u>				
Street Address <u>514 W 3rd Ave</u>			Registration Number, if PAC	
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43201</u>	M <u>0</u>	D <u>6</u>
Employer/Occupation/Labor Organization*		Y <u>05</u>	Amount <u>10.00</u>	
Form(Cash, Check, etc) <u>Cash</u>				
Full Name of Contributor <u>Kristen Brown</u>				
Street Address <u>1489 Oakbourne Drive</u>			Registration Number, if PAC	
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43235</u>	M <u>0</u>	D <u>6</u>
Employer/Occupation/Labor Organization*		Y <u>05</u>	Amount <u>10.00</u>	
Form(Cash, Check, etc) <u>Cash</u>				
Full Name of Contributor <u>Corwin Smith</u>				
Street Address <u>8241 Long Horn</u>			Registration Number, if PAC	
City <u>Powell</u>	State <u>OH</u>	Zip Code <u>43065</u>	M <u>0</u>	D <u>6</u>
Employer/Occupation/Labor Organization*		Y <u>05</u>	Amount <u>10.00</u>	
Form(Cash, Check, etc) <u>Cash</u>				
Full Name of Contributor <u>Dyango A Snell</u>				
Street Address <u>1681 Carstare Dr</u>			Registration Number, if PAC	
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43227</u>	M <u>0</u>	D <u>6</u>
Employer/Occupation/Labor Organization*		Y <u>05</u>	Amount <u>35.00</u>	
Form(Cash, Check, etc) <u>Check</u>				
Full Name of Contributor <u>William A. Thorman</u>				
Street Address <u>255 W Schreyer Pl</u>			Registration Number, if PAC	
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43214</u>	M <u>0</u>	D <u>6</u>
Employer/Occupation/Labor Organization*		Y <u>05</u>	Amount <u>35.00</u>	
Form(Cash, Check, etc) <u>Check</u>				
Full Name of Contributor <u>Tonya McCreary Williams</u>				
Street Address <u>854 South Waverly Street</u>			Registration Number, if PAC	
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43227</u>	M <u>0</u>	D <u>6</u>
Employer/Occupation/Labor Organization*		Y <u>05</u>	Amount <u>35.00</u>	
Form(Cash, Check, etc) <u>Check</u>				

* 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

Total expenditures this event

Page Total \$ 145.00