

# Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Friends of Marilyn Brown</b>							
Full Name of Contributor <b>Rory McGuinness</b>				Registration Number, if PAC			
Street Address <b>1430 Cross Creek Drived</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>5</b>	<b>0</b>	<b>50.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43204</b>		Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Kathleen Murphy</b>				Registration Number, if PAC			
Street Address <b>2416 Southway Drive</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>5</b>	<b>0</b>	<b>125.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43221</b>		Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Linda K. Page</b>				Registration Number, if PAC			
Street Address <b>1477 Sedgefield Drive</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>5</b>	<b>0</b>	<b>150.00</b>
City <b>New Albany</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43054</b>		Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Michael Rankin</b>				Registration Number, if PAC			
Street Address <b>545 E Town Street</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>5</b>	<b>0</b>	<b>150.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43215</b>		Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Eryn Campbell</b>				Registration Number, if PAC			
Street Address <b>1324 W Sixth Ave</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>5</b>	<b>0</b>	<b>50.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43212</b>		Form(Cash,Check,etc) <b>Cash</b>	
Full Name of Contributor <b>Robert McCallum</b>				Registration Number, if PAC			
Street Address <b>645 Neil Ave</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>5</b>	<b>0</b>	<b>100.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43215</b>		Form(Cash,Check,etc) <b>Cash</b>	
Full Name of Contributor <b>Elissa Schneider</b>				Registration Number, if PAC			
Street Address <b>154 Lundy Street</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>5</b>	<b>0</b>	<b>50.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43215</b>		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

Total expenditures this event

Page Total \$ 675.00