

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Friends of Marilyn Brown</b>					
Full Name of Contributor <b>Gort Gatterdam</b>			Registration Number, if PAC		
Street Address <b>10159 Archer Lane</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>	Y <b>2</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43017</b>	Amount <b>\$50.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Mark Brown</b>			Registration Number, if PAC		
Street Address <b>83 Hanford Street</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>	Y <b>2</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Amount <b>\$25.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Jamie Greene</b>			Registration Number, if PAC		
Street Address <b>444 S Front Street</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>	Y <b>2</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Amount <b>\$100.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Laura Wisebaker Repasky</b>			Registration Number, if PAC		
Street Address <b>1355 Haybrook Dr</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>	Y <b>0</b>
City <b>Gahanna</b>	State <b>OH</b>	Zip Code <b>43230</b>	Amount <b>\$25.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Gabrielle Wonnell</b>			Registration Number, if PAC		
Street Address <b>3191 Minerva Lake Road</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43231</b>	Amount <b>\$25.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Alissa Holfinger</b>			Registration Number, if PAC		
Street Address <b>501 S High Street</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Amount <b>\$50.00</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Timothy Stehle</b>			Registration Number, if PAC		
Street Address <b>4060 Baughman Grant</b>	Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>	Y <b>0</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	Amount <b>\$1,000.00</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 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
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Total expenditures this event.

\$0.00
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Page Total \$ 1,275.00
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