

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

Prescribed by Secretary of State 03/05

|   |   |                          |   |                             |               |                         |
|---|---|--------------------------|---|-----------------------------|---------------|-------------------------|
| Name of Committee in Full<br><b>Franklin County Democratic Lawyers Club</b> |   |                          |   |                             |               |                         |
| Full Name of Contributor<br><b>Peter J. Georgiton</b>                       |   |                          |   | Registration Number, if PAC |               |                         |
| Street Address<br><b>5535 Caplestone Lane</b>                               | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                           | D<br><b>7</b>               | Y<br><b>2</b> | Amount<br><b>\$5.00</b> |
| City<br><b>Dublin</b>   | State<br><b>OH</b>                      | Zip Code<br><b>43017</b> | Form (Cash, Check, etc.)<br><b>cash</b> |                             |               |                         |
| Full Name of Contributor<br><b>Jeff Mackey</b>                              |   |                          |   | Registration Number, if PAC |               |                         |
| Street Address<br><b>655 Cooper Road</b>                                    | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                           | D<br><b>7</b>               | Y<br><b>2</b> | Amount<br><b>\$5.00</b> |
| City<br><b>Westerville</b>  | State<br><b>OH</b>                      | Zip Code<br><b>43081</b> | Form (Cash, Check, etc.)<br><b>cash</b> |                             |               |                         |
| Full Name of Contributor<br><b>Jeff Yeager</b>                              |   |                          |   | Registration Number, if PAC |               |                         |
| Street Address<br><b>904 Oxley Road</b>                                     | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                           | D<br><b>7</b>               | Y<br><b>2</b> | Amount<br><b>\$5.00</b> |
| City<br><b>Columbus</b>   | State<br><b>OH</b>                      | Zip Code<br><b>43212</b> | Form (Cash, Check, etc.)<br><b>cash</b> |                             |               |                         |
| Full Name of Contributor<br><b>Lara Baker-Morrish</b>                       |   |                          |   | Registration Number, if PAC |               |                         |
| Street Address<br><b>8015 Riverside Drive</b>                               | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                           | D<br><b>7</b>               | Y<br><b>2</b> | Amount<br><b>\$5.00</b> |
| City<br><b>Dublin</b>   | State<br><b>OH</b>                      | Zip Code<br><b>43016</b> | Form (Cash, Check, etc.)<br><b>cash</b> |                             |               |                         |
| Full Name of Contributor<br><b>Benjamin Tracy</b>                           |   |                          |   | Registration Number, if PAC |               |                         |
| Street Address<br><b>2731 Chester Road</b>                                  | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                           | D<br><b>7</b>               | Y<br><b>2</b> | Amount<br><b>\$5.00</b> |
| City<br><b>Upper Arlington</b>  | State<br><b>OH</b>                      | Zip Code<br><b>43221</b> | Form (Cash, Check, etc.)<br><b>cash</b> |                             |               |                         |
| Full Name of Contributor<br><b>Monica Hawkins</b>                           |   |                          |   | Registration Number, if PAC |               |                         |
| Street Address<br><b>2815 Kingsrowe Court</b>                               | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                           | D<br><b>7</b>               | Y<br><b>2</b> | Amount<br><b>\$5.00</b> |
| City<br><b>Columbus</b>   | State<br><b>OH</b>                      | Zip Code<br><b>43209</b> | Form (Cash, Check, etc.)<br><b>cash</b> |                             |               |                         |
| Full Name of Contributor<br><b>Shawn Dings</b>                              |   |                          |   | Registration Number, if PAC |               |                         |
| Street Address<br><b>76 East 3rd Avenue</b>                                 | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                           | D<br><b>7</b>               | Y<br><b>2</b> | Amount<br><b>\$5.00</b> |
| City<br><b>Columbus</b>   | State<br><b>OH</b>                      | Zip Code<br><b>43201</b> | Form (Cash, Check, etc.)<br><b>cash</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

**\$101.00**

Total expenditures this event.

**\$0.00**

Page Total \$ **\$35.00**