

**FILED**  
**Statement of Contributions Received**  
**at a Social or Fundraising Event**  
13 OCT 23 AM 9:05  
FRANKLIN COUNTY  
BOARD OF ELECTIONS  
Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Franklin County Libertarian Party</b>				
Full Name of Contributor <b>Michael Johnston</b>			Registration Number, if PAC	
Street Address <b>5956 Mclessv Dr</b>	Employer/Occupation/Labor Organization* <b>Teleperformance/Develop</b>		M <b>0</b>	D <b>6</b>
City <b>Westerville</b>	State <b>O   H</b>	Zip Code <b>43081</b>	Y <b>1</b>	Amount <b>70.00</b>
Form (Cash, Check, etc) <b>Check</b>				
Full Name of Contributor <b>Temsen O'Neill</b>			Registration Number, if PAC	
Street Address <b>60 Arden Road</b>	Employer/Occupation/Labor Organization* <b>Full time parent</b>		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43214</b>	Y <b>1</b>	Amount <b>10.00</b>
Form (Cash, Check, etc) <b>Papal</b>				
Full Name of Contributor <b>Bob Bridges</b>			Registration Number, if PAC	
Street Address <b>2724 Christine Blvd</b>	Employer/Occupation/Labor Organization* <b>Broad &amp; James Towing/Dr</b>		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43231</b>	Y <b>1</b>	Amount <b>12.00</b>
Form (Cash, Check, etc) <b>Cash</b>				
Full Name of Contributor <b>Amv Bridges</b>			Registration Number, if PAC	
Street Address <b>2724 Christine Blvd</b>	Employer/Occupation/Labor Organization* <b>Full time parent</b>		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43231</b>	Y <b>1</b>	Amount <b>10.00</b>
Form (Cash, Check, etc) <b>Cash</b>				
Full Name of Contributor <b>Ingrid Loesch</b>			Registration Number, if PAC	
Street Address <b>878 4th Ave G</b>	Employer/Occupation/Labor Organization* <b>Entelec. Research</b>		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43201</b>	Y <b>1</b>	Amount <b>12.00</b>
Form (Cash, Check, etc) <b>Cash</b>				
Full Name of Contributor <b>Chris Roisman</b>			Registration Number, if PAC	
Street Address <b>530 Ravensbrook Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43119</b>	Y <b>1</b>	Amount <b>20.00</b>
Form (Cash, Check, etc) <b>Cash</b>				
Full Name of Contributor <b>Jillian Roach</b>			Registration Number, if PAC	
Street Address <b>1191 Oregon Ave</b>	Employer/Occupation/Labor Organization* <b>GSW / Acct Exec</b>		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43201</b>	Y <b>1</b>	Amount <b>20.00</b>
Form (Cash, Check, etc) <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 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 \$ 154.00