

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <i>Vote For ALBRIGHT</i>				
Full Name of Contributor <i>Annastacia D. Pavette</i>			Registration Number, if PAC	
Street Address <i>6211 Beaver Lake Dr</i>	Employer/Occupation/Labor Organization*		M <i>10</i>	D <i>22</i>
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Y <i>09</i>	Amount <i>270⁰⁰</i>
Form (Cash, Check, etc.) <i>ck</i>				
Full Name of Contributor <i>Cirk E. Bidlack</i>			Registration Number, if PAC	
Street Address <i>2435 Gershwin Ave.</i>	Employer/Occupation/Labor Organization*		M <i>10</i>	D <i>22</i>
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Y <i>09</i>	Amount <i>100⁰⁰</i>
Form (Cash, Check, etc.) <i>ck</i>				
Full Name of Contributor <i>Michael H. Boggs</i>			Registration Number, if PAC	
Street Address <i>4411 McDowell Rd</i>	Employer/Occupation/Labor Organization*		M <i>10</i>	D <i>22</i>
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Y <i>09</i>	Amount <i>100⁰⁰</i>
Form (Cash, Check, etc.) <i>ck</i>				
Full Name of Contributor <i>Violet Nolze</i>			Registration Number, if PAC	
Street Address <i>4400 Hoover Rd</i>	Employer/Occupation/Labor Organization*		M <i>10</i>	D <i>22</i>
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Y <i>09</i>	Amount <i>75⁰⁰</i>
Form (Cash, Check, etc.) <i>ck</i>				
Full Name of Contributor <i>JUDITH A MOLINO</i>			Registration Number, if PAC	
Street Address <i>1 Miranova Pl</i>	Employer/Occupation/Labor Organization*		M <i>10</i>	D <i>22</i>
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43215</i>	Y <i>09</i>	Amount <i>50⁰⁰</i>
Form (Cash, Check, etc.) <i>ck</i>				
Full Name of Contributor <i>Margaret Allison Reiser</i>			Registration Number, if PAC	
Street Address <i>2895 Annabelle St</i>	Employer/Occupation/Labor Organization*		M <i>10</i>	D <i>22</i>
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Y <i>09</i>	Amount <i>50⁰⁰</i>
Form (Cash, Check, etc.) <i>ck</i>				
Full Name of Contributor <i>Cheryl L. Grossman</i>			Registration Number, if PAC	
Street Address <i>3143 Park Street</i>	Employer/Occupation/Labor Organization*		M <i>10</i>	D <i>22</i>
City <i>Grove City</i>	State <i>OH</i>	Zip Code <i>43123</i>	Y <i>09</i>	Amount <i>25⁰⁰</i>
Form (Cash, Check, etc.) <i>ck</i>				

* 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

<i>82.00</i>

Total expenditures this event.

<i>7.00</i>

Page Total \$

<i>670⁰⁰</i>
