

Event Date 4/2/2009

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## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full <b>Friends of McGivern</b>					
Full Name of Contributor <b>Joseph R. Stevens</b>				Registration Number, if PAC	
Street Address <b>1621 Berkshire Road</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43221</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>Priscilla D. Mead</b>				Registration Number, if PAC	
Street Address <b>2281 Brixton Road</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43221</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>25.00</b>
Full Name of Contributor <b>Carolyn M. McGivern</b>				Registration Number, if PAC	
Street Address <b>881 Westport Drive</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Youngstown</b>	State <b>O</b>	Zip Code <b>44511</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>David J. Robinson</b>				Registration Number, if PAC	
Street Address <b>130 Northridge Road</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43214</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>150.00</b>
Full Name of Contributor <b>Gregory P. Barwell Co., LLC</b>				Registration Number, if PAC	
Street Address <b>41 South High Street, Suite 1275</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>Theodore G. Fisher</b>				Registration Number, if PAC	
Street Address <b>190 S. Dawson Avenue</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43209</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>150.00</b>
Full Name of Contributor <b>Dean A. Fadel, Jr.</b>				Registration Number, if PAC	
Street Address <b>1768 Chateaugay Way</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>0</b>
City <b>Blacklick</b>	State <b>O</b>	Zip Code <b>43004</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>200.00</b>

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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