31-E R.C. 3517.10(B)

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 2/01

Event Date	3/12/07
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Name of Committee in Full Connittee for Joseph W	1. 7	-	/ z		
Full Name of Contributor	Registration Number, if PAC				
Nelson Kohman					
Street Address	Employe	r/Occupati	ion/Labor Organization*	M D Y	Amount
10039 Hollow R1.				03220	7 500.00
City /	St	a te	Zip Code	Form (Cash, Check, etc.	:)
Pataskala	0	H	43062	Chack	
Full Name of Contributor			The second secon	Registration Number,	f PAC
John Brandt					
Street Address	Employer/Occupation/Labor Organization*			MDY	Amount
5187 Smothers Rd.				03220	
City	1	a te	Zip Code 43681	Form (Cash, Check, etc	,
Westerville	0	H	75001	Registration Number, i	f PAC
Full Name of Contributor				Registration Frances,	
Street Address	Employee	·/Occumati	ion/I abor Organization*	M D Y	Amount
2525 Wimbledon Rd.	Employer/Occupation/Labor Organization*			03220	7 1,000.00
City	Sta	te te	Zip Code	Form (Cash, Check, etc.	.)
Colombs	0	H	43220	Check	
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·		<i></i>	Registration Number, i	f PAC
Laurence Ruben					
Street Address	Employer/Occupation/Labor Organization*			M D Y	Amount
140 S. Columbia He.		1	12: 0-1-	63220 Form (Cash, Check, etc	7 1,000.00
City	OSE	a te	Zip Code 43209	Form (Cash, Check, etc.	
Full Name of Contributor		1 1	73201	Registration Number,	f PAC
α				Trog.out.io.	
Street Address	Employe	r/Occumati	ion/Labor Organization*	M D Y	Amount
423 Hickory La.	Employer/Occupation/Labor Organization*			03220	7 600.00
City	St	a te	Zip Code	Form (Cash, Check, etc	c.)
Westers. He	0	14	43081	Check	
Full Name of Contributor		er et a de la companya de la company		Registration Number,	if PAC
RL Richards					
Street Address	Employe	r/Occupati	ion/Labor Organization*	M D Y	Amount 7 1,000.00
5398 Preston Mill Way			72: 0-4-	03220 Form (Cash, Check, et	
City	i	a te	Zip Code 4-30/7		
Full Name of Contributor		/-7	730//	Registration Number,	
Harley E. Royda					
Street Address	Employer/Occupation/Labor Organization*			M D Y	Amount
2285 Torkshire Kd.	_		Tr: 0.1	03220	7 100.00
City	1	ta te	Zip Code	Form (Cash, Check, et	с.)
Lolumbs	0	1-1	43221	Check	

in the date column

Transfer the Total contributions for		of Contributor state "Contributions from form No. 31-E"	and list the date of the event				
Total contributions this event		Total expenditures this event.					
	. ed. =) \$\frac{1}{2} \tau^2 \cdot \tau^2 \		Page Tota				

als 4, 235.00

^{*} 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 also appear. [R.C. 3517.10(B)(4)]