

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

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Committee to Elect DJ Falcoski</b>							
Full Name of Contributor <b>McLaughlin, Anjel</b>				Registration Number, if PAC			
Street Address <b>1310 Grandview Avenue</b>		Employer/Occupation/Labor Organization* <b>Hair Salon Owner</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43212</b>		Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Johnson, John P.</b>				Registration Number, if PAC			
Street Address <b>501 S High Street</b>		Employer/Occupation/Labor Organization* <b>Attorney</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>100.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43215</b>		Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Shivley, Patrick</b>				Registration Number, if PAC			
Street Address <b>1159 Harrison Pond Drive</b>		Employer/Occupation/Labor Organization* <b>President Guaranteed Dev</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>New Albany</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43054</b>		Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Houze, David W</b>				Registration Number, if PAC			
Street Address <b>500 S Front Street, Ste 1200</b>		Employer/Occupation/Labor Organization* <b>Retired</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>100.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43215</b>		Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Guiliani, Anthony</b>				Registration Number, if PAC			
Street Address <b>2055 Havenswood Place</b>		Employer/Occupation/Labor Organization* <b>Vory's, SS&amp;P/ Attorney</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>100.00</b>
City <b>Blacklick</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43004</b>		Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Lehner, William E.</b>				Registration Number, if PAC			
Street Address <b>2709 McVey Blvd. W</b>		Employer/Occupation/Labor Organization* <b>Self/ Architect</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43235</b>		Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Arnold, George</b>				Registration Number, if PAC			
Street Address <b>3020 Dale Avenue</b>		Employer/Occupation/Labor Organization* <b>HR Grey Engineering</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43209</b>		Form(Cash,Check,etc) <b>Check</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

500.00

Total expenditures this event

292.50

Page Total \$ 500.00