

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Hans for School Board</u>				
Full Name of Contributor <u>Asriel Strip</u>			Registration Number, if PAC	
Street Address <u>5482 Aryshire Dr.</u>	Employer/Occupation/Labor Organization*		M <u>10</u> D <u>21</u> Y <u>09</u>	Amount <u>50.00</u>
City <u>Dublin</u>	State <u>OH</u>	Zip Code <u>43017</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Montgomery for County Recorder</u>			Registration Number, if PAC	
Street Address <u>865 Macon Alley</u>	Employer/Occupation/Labor Organization*		M <u>10</u> D <u>21</u> Y <u>09</u>	Amount <u>500.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43206</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Wiles, Boyle, Burkholder Bringardner Co. LPA</u>			Registration Number, if PAC	
Street Address <u>300 Spruce St.</u>	Employer/Occupation/Labor Organization*		M <u>10</u> D <u>21</u> Y <u>09</u>	Amount <u>250.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43215</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>James B. Hadden</u>			Registration Number, if PAC	
Street Address <u>825 City Park Ave</u>	Employer/Occupation/Labor Organization*		M <u>10</u> D <u>21</u> Y <u>09</u>	Amount <u>50.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43206</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>George R. McCue</u>			Registration Number, if PAC	
Street Address <u>4598 Bridle Path Ln</u>	Employer/Occupation/Labor Organization*		M <u>10</u> D <u>21</u> Y <u>09</u>	Amount <u>250.00</u>
City <u>Dublin</u>	State <u>OH</u>	Zip Code <u>43017</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Janet Hale</u>			Registration Number, if PAC	
Street Address <u>U637 Merwin Rd</u>	Employer/Occupation/Labor Organization*		M <u>10</u> D <u>21</u> Y <u>09</u>	Amount <u>50.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43235</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Valoria C. Hoover</u>			Registration Number, if PAC	
Street Address <u>5972 Dunheath Loop</u>	Employer/Occupation/Labor Organization*		M <u>10</u> D <u>21</u> Y <u>09</u>	Amount <u>150.00</u>
City <u>Dublin</u>	State <u>OH</u>	Zip Code <u>43016</u>	Form (Cash, Check, etc.) <u>check</u>	

* 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

\$0.00

Total expenditures this event.

\$0.00

\$1,300.00
Page Total \$ <u>\$0.00</u>