

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Friends of Marilyn Brown</b>					
Full Name of Contributor <b>Nancy Hamilton</b>				Registration Number, if PAC	
Street Address <b>2765 Charin Road</b>		Employer/Occupation/Labor Organization*		M D Y <b>0 8 2 4 0 6</b>	Amount <b>\$25.00</b>
City <b>Upper Arlington</b>		State <b>OH</b>	Zip Code <b>43221</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Gultekin Ludden</b>				Registration Number, if PAC	
Street Address <b>470 Walhalla Road</b>		Employer/Occupation/Labor Organization*		M D Y <b>0 8 2 4 0 6</b>	Amount <b>\$25.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43202</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Jan Davis</b>				Registration Number, if PAC	
Street Address <b>2492 Edgevale Road</b>		Employer/Occupation/Labor Organization*		M D Y <b>0 8 2 4 0 6</b>	Amount <b>\$25.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43221</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Judy Nasar</b>				Registration Number, if PAC	
Street Address <b>3003 Sudbury Road</b>		Employer/Occupation/Labor Organization*		M D Y <b>0 8 2 4 0 6</b>	Amount <b>\$25.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43221</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Riek Oldenquist</b>				Registration Number, if PAC	
Street Address <b>176 Walhalla Road</b>		Employer/Occupation/Labor Organization*		M D Y <b>0 8 2 4 0 6</b>	Amount <b>\$100.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43202</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Edith Korda</b>				Registration Number, if PAC	
Street Address <b>410 N Columbia Ave</b>		Employer/Occupation/Labor Organization*		M D Y <b>0 8 2 4 0 6</b>	Amount <b>\$100.00</b>
City <b>Bexley</b>		State <b>OH</b>	Zip Code <b>43209</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Marianne Mueller</b>				Registration Number, if PAC	
Street Address <b>4361 Shire Creek Court</b>		Employer/Occupation/Labor Organization*		M D Y <b>0 8 2 3 0 6</b>	Amount <b>\$50.00</b>
City <b>Hilliard</b>		State <b>OH</b>	Zip Code <b>43026</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 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**

Page Total \$ **\$350.00**