

# Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Friends of Cornell Robertson</b>					
Full Name of Contributor <b>Phil Razor</b>				Registration Number, if PAC	
Street Address <b>4265 Reedbury Lane</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   3   0   1   1   1</b>	Amount <b>50.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43220</b>		Form (Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Robert Redfield</b>				Registration Number, if PAC	
Street Address <b>4205 Bowmansroot Court</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   3   0   1   1   1</b>	Amount <b>50.00</b>
City <b>Hilliard</b>	State <b>O   H</b>	Zip Code <b>43026</b>		Form (Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Suzann Rhodes</b>				Registration Number, if PAC	
Street Address <b>7466 Almendinger Road</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   3   0   1   1   1</b>	Amount <b>50.00</b>
City <b>Prospect</b>	State <b>O   H</b>	Zip Code <b>43342</b>		Form (Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Citizens to Elect Tim Roberts</b>				Registration Number, if PAC	
Street Address <b>5307 Franklin Street</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   3   0   1   1   1</b>	Amount <b>100.00</b>
City <b>Hilliard</b>	State <b>O   H</b>	Zip Code <b>43026</b>		Form (Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Gerald Rocco</b>				Registration Number, if PAC	
Street Address <b>2545 Bryton</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   3   0   1   1   1</b>	Amount <b>50.00</b>
City <b>Powell</b>	State <b>O   H</b>	Zip Code <b>43065</b>		Form (Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>Scott Roe</b>				Registration Number, if PAC	
Street Address <b>5764 County House Lane</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   3   0   1   1   1</b>	Amount <b>50.00</b>
City <b>Dublin</b>	State <b>O   H</b>	Zip Code <b>43017</b>		Form (Cash, Check, etc) <b>Check</b>	
Full Name of Contributor <b>David Rourke</b>				Registration Number, if PAC	
Street Address <b>1361 Haines Ave.</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   3   0   1   1   1</b>	Amount <b>75.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43212</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

Total expenditures this event

Page Total \$ 425.00