

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Everyone for Ed Leonard				
Full Name of Contributor Jeff Rich/Rich & Gillis Law Group, LLC			Registration Number, if PAC	
Street Address 6400 Riverside Drive, Suite D	Employer/Occupation/Labor Organization* Rich & Gillis/Attorney		M 0	D 5
City Dublin	State O	Zip Code H 43017	Y 1	Amount 100.00
Form(Cash,Check,etc) Check				
Full Name of Contributor Kenneth M. Richards/Luper Neidenthal & Logan LPA			Registration Number, if PAC	
Street Address 4311 Woodstream Drive	Employer/Occupation/Labor Organization* Luper Neidenthal/Attorney		M 0	D 5
City Columbus	State O	Zip Code H 43230	Y 1	Amount 250.00
Form(Cash,Check,etc) Check				
Full Name of Contributor David M. Scott/Luper Neidenthal & Logan LPA			Registration Number, if PAC	
Street Address 920 Evening Street	Employer/Occupation/Labor Organization* Luper Neidenthal/Attorney		M 0	D 5
City Worthington	State O	Zip Code H 43085	Y 1	Amount 250.00
Form(Cash,Check,etc) Check				
Full Name of Contributor Henry P. Wickham/Luper Neidenthal & Logan LPA			Registration Number, if PAC	
Street Address 1285 Arlington Ave	Employer/Occupation/Labor Organization* Luper Neidenthal/Attorney		M 0	D 5
City Columbus	State O	Zip Code H 43212	Y 1	Amount 250.00
Form(Cash,Check,etc) Check				
Full Name of Contributor Gregory H. Melix/Luper Neidenthal & Logan LPA			Registration Number, if PAC	
Street Address 7222 Marylebury Square	Employer/Occupation/Labor Organization* Luper Neidenthal/Attorney		M 0	D 5
City New Albany	State O	Zip Code H 43054	Y 1	Amount 250.00
Form(Cash,Check,etc) Check				
Full Name of Contributor James O. Heiberger			Registration Number, if PAC	
Street Address 4595 Shires Ct	Employer/Occupation/Labor Organization* MAPSYS/VP		M 0	D 5
City Columbus	State O	Zip Code H 43220	Y 1	Amount 1,500.00
Form(Cash,Check,etc) Check				
Full Name of Contributor Andrew Showe			Registration Number, if PAC	
Street Address 2480 W Lane Ave	Employer/Occupation/Labor Organization* Self-Employed/Real Estate		M 0	D 5
City Columbus	State O	Zip Code H 43221	Y 1	Amount 100.00
Form(Cash,Check,etc) Check				

* 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 \$ 2,700.00