Event Date	3/4/10
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## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Se	cretary of State 3/05	V44-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-						
DY			·					
SHEET				Registration Number, if PAC				
	ation/Labor Organization*	М	D	Y	Amount			
2	_		1	1 1		14,159.00		
State	Zip Code	Form(Ca	ash,Check	(,etc)				
		Registra	tion Num	ber, if PA	С			
Employer/Occup	nployer/Occupation/Labor Organization*		D	Y	Amount			
State	Zip Code	Form(C	ash,Check	c,etc)				
		Registra	ition Num	ber, if PA	С			
Employer/Occup	pation/Labor Organization*	M D Y		Amount				
State	Zip Code	Form(C	ash,Checl	k,etc)				
		Registra	atíon Num	ber, if PA	C			
Employer/Occup	oation/Labor Organization*	М	D	Y	Amount			
State	Zip Code	Form(C	ash,Checl	k,etc)				
		Registra	ation Num	iber, if PA	vC			
Employer/Occup	oation/Labor Organization*	M D Y		Amount				
State	Zip Code	Form(C	ash,Chec	k,etc)				
Full Name of Contributor				Registration Number, if PAC				
Employer/Occup	oation/Labor Organization*	М	D	Y	Amount			
State	Zip Code	Form(C	ash,Chec	k,etc)				
Full Name of Contributor			Registration Number, if PAC					
Employer/Occup	oation/Labor Organization*	M	D	Y	Amount			
State	Zip Code	Form(C	ash,Chec	k,etc)				
	SHEET  Employer/Occup  State  Employer/Occup  State  Employer/Occup  State  Employer/Occup  State  Employer/Occup  State  Employer/Occup  State  Employer/Occup	Employer/Occupation/Labor Organization*    State	Employer/Occupation/Labor Organization*	SHEET    Employer/Occupation/Labor Organization*	SHEET    Employer/Occupation/Labor Organization*	SHEET    Registration Number, if PAC		

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

Total contributions this event	Total expenditures this event	
		Page Total \$ 14,159.00
14.159.00	2.104.91	

<sup>\*</sup> 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)]