

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Terry Boyd for School Board Committee							
Full Name of Contributor James R. Hess				Registration Number, if PAC			
Street Address 6201 Heritage Lakes Drive		Employer/Occupation/Labor Organization*		M 1	D 1	Y 0	Amount 150.00
City Hilliard	State O H	Zip Code 43206		Form(Cash, Check, etc) Check			
Full Name of Contributor Garry McDaniel and Lauren B. McDaniel				Registration Number, if PAC			
Street Address 6234 Tetlin Field Drive		Employer/Occupation/Labor Organization*		M 1	D 1	Y 0	Amount 150.00
City New Albany	State O H	Zip Code 43054		Form(Cash, Check, etc) Check			
Full Name of Contributor Christopher Washington				Registration Number, if PAC			
Street Address 7975 Windrift Place		Employer/Occupation/Labor Organization*		M 1	D 1	Y 0	Amount 150.00
City Reynoldsburg	State O H	Zip Code 43068		Form(Cash, Check, etc) Check			
Full Name of Contributor Melvin E. Walden				Registration Number, if PAC			
Street Address 50 Forest Ridge Court		Employer/Occupation/Labor Organization*		M 1	D 1	Y 0	Amount 150.00
City Powell	State O H	Zip Code 43065		Form(Cash, Check, etc) Check			
Full Name of Contributor Ronald J. Rotaru				Registration Number, if PAC			
Street Address 4086 Hanover Square Drive		Employer/Occupation/Labor Organization*		M 1	D 1	Y 0	Amount 150.00
City Dublin	State O H	Zip Code 43016		Form(Cash, Check, etc) Check			
Full Name of Contributor Ronald L. Hartung				Registration Number, if PAC			
Street Address 1129 Fordham Road		Employer/Occupation/Labor Organization*		M 1	D 1	Y 0	Amount 50.00
City Columbus	State O H	Zip Code 43224		Form(Cash, Check, etc) Check			
Full Name of Contributor Cinnamon Pelly				Registration Number, if PAC			
Street Address 5140 N. High Street, #111		Employer/Occupation/Labor Organization*		M 1	D 1	Y 0	Amount 150.00
City Columbus	State O H	Zip Code 43214		Form(Cash, Check, etc) 150.00			

* 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 \$ 950.00