

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Everyone for Ed Leonard</b>					
Full Name of Contributor <b>People for Page</b>				Registration Number, if PAC	
Street Address <b>1244 Erickson Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>16</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43227</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>500.00</b>
Full Name of Contributor <b>Stephen E Mindzak/Stephen E Mindzak Law Offices LLC</b>				Registration Number, if PAC	
Street Address <b>5 East Long Street, Suite 400</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>16</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>500.00</b>
Full Name of Contributor <b>John F Ferner</b>				Registration Number, if PAC	
Street Address <b>3933 London-Lancaster Road</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>16</b>
City <b>Groveport</b>	State <b>OH</b>	Zip Code <b>43125</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>300.00</b>
Full Name of Contributor <b>Jobs America PAC</b>				Registration Number, if PAC <b>C00554055</b>	
Street Address <b>545 E Town Street</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>16</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>500.00</b>
Full Name of Contributor <b>Central Ohio Realtors Political Action Committee</b>				Registration Number, if PAC	
Street Address <b>2700 Airport Drive</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>16</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43219</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>500.00</b>
Full Name of Contributor <b>Kristin I Brvant</b>				Registration Number, if PAC	
Street Address <b>387 Chevenne Wav</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>16</b>
City <b>Reynoldsburg</b>	State <b>OH</b>	Zip Code <b>43068</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>Deborah M Somerville</b>				Registration Number, if PAC	
Street Address <b>4522 Natural Trail</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>1</b>	Y <b>16</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</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 \$ 2,400.00