

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

Prescribed by Secretary of State 3105

Name of Committee in Full <b>Palmer For School Board</b>							
Full Name of Contributor <b>SWEA - EPAC</b>				Registration Number, if PAC			
Street Address <b>4171 Hoover Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <b>Grove City</b>		State <b>OH</b>	Zip Code <b>43123</b>	<b>10</b>	<b>08</b>	<b>09</b>	<b>\$2000.00</b>
Form(Cash, Check, etc) <b>check</b>							
Full Name of Contributor <b>Kevin E. Langen</b>							
Street Address <b>5020 Dublin Road</b>				Registration Number, if PAC			
City <b>Dublin</b>		State <b>OH</b>	Zip Code <b>43017</b>	M	D	Y	Amount
				<b>10</b>	<b>09</b>	<b>09</b>	<b>\$50.00</b>
Form(Cash, Check, etc) <b>check</b>							
Full Name of Contributor <b>Jane Warne White</b>							
Street Address <b>4049 Ritamarie Drive</b>				Registration Number, if PAC			
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43220</b>	M	D	Y	Amount
				<b>10</b>	<b>14</b>	<b>09</b>	<b>\$50.00</b>
Form(Cash, Check, etc) <b>check</b>							
Full Name of Contributor <b>Dawn A. Lauridsen - Long</b>							
Street Address <b>6300 Rager Road</b>				Registration Number, if PAC			
City <b>Groveport</b>		State <b>OH</b>	Zip Code <b>43125</b>	M	D	Y	Amount
				<b>10</b>	<b>09</b>	<b>09</b>	<b>\$25.00</b>
Form(Cash, Check, etc) <b>check</b>							
Full Name of Contributor <b>Mary Ellen Cahill</b>							
Street Address <b>866 Lynnhaven Ct</b>				Registration Number, if PAC			
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43228</b>	M	D	Y	Amount
				<b>10</b>	<b>20</b>	<b>09</b>	<b>\$20.00</b>
Form(Cash, Check, etc) <b>check</b>							
Full Name of Contributor <b>Georgine S Collette</b>							
Street Address <b>3844 Stonestrow Lane</b>				Registration Number, if PAC			
City <b>Hilliard</b>		State <b>OH</b>	Zip Code <b>43026</b>	M	D	Y	Amount
				<b>10</b>	<b>06</b>	<b>09</b>	<b>\$25.00</b>
Form(Cash, Check, etc) <b>check</b>							
Full Name of Contributor <b>Clinton T. Rardon</b>							
Street Address <b>2308 Josephine Circle</b>				Registration Number, if PAC			
City <b>Grove City</b>		State <b>OH</b>	Zip Code <b>43123</b>	M	D	Y	Amount
				<b>10</b>	<b>02</b>	<b>09</b>	<b>\$25.00</b>
Form(Cash, Check, etc)							

\* 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 \$ 0.00

Page Total \$ 0.00