## Statement of Contributions Received at a Social or Fund-Raising Event

Event Date_3/30/05
11
Page 11

Prescribed by Secretary of State 03/05

Full Name of Centributor   Gail A. White-Dixon	Name of Committee in Full			
Street Address	Name of Committee in Full			
Street Address		Registration Number, if PAC		
1652 Bryden Road				
Stoletarrow		Employer/Occupation/Labor Organization*		
Columbus		G. I.	7:- Codo	
Full Name of Contributor   Jamie A. Liggins   Employer/Occupation/Labor Organization*   M   D   S   S   S   S   S   S   S   S   S		,	1 -	
Street Address   Stage   Zip Code   Columbus   Columb		1 011		
3146 Cumberland Woods Drive.				-
Stajte   Zip Code   Form (Cash, Check, etc.)   Columbus   Columbus   Check	Street Address	Employer/Occupation/Labor Organization*		
Columbus				
Full Name of Contributor	•	,	1 *	
H. Lee Thompson   Street Address   Employer/Occupation/Labor Organization*   M   D   O   Stand   Stand   D   O   Stand   Sta		Un	43218	
Street Address   Employer/Occupation/Labor Organization*				Togardan Number, ii 1110
State   Zip Code   Columbus   Check   Columbus   Check   Che	-	Employer/Occup	oation/Labor Organization*	M D Y Amount
Columbus	85 East Gay Street, Suite 810		<b>5</b>	0 4 0 6 0 5 \$100.00
Full Name of Contributor Anthony P. English  Street Address 2890 Wambli Drive  City Columbus  Street Address OH 43219  Check  Full Name of Contributor Gayle Channing Tenenbaum  Street Address 164 North Harding Road  City Columbus  Employer/Occupation/Labor Organization*  Stal te Zip Code OH 43219  Check  Employer/Occupation/Labor Organization*  Stal te Zip Code OH 43209  City Columbus  Employer/Occupation/Labor Organization*  Stal te Zip Code OH 43209  City Columbus  Employer/Occupation/Labor Organization*  Stal te Zip Code OH 43209  City Columbus  Employer/Occupation/Labor Organization*  Stal te Zip Code OH 43209  City Columbus  Full Name of Contributor Citizens With Ford  Street Address 1935 Shenandoah Ave.  Employer/Occupation/Labor Organization*  Stal te Zip Code OH 43607  Form (Cash, Check, etc.) Check  Form (Cash, Check, etc.) Check  Stal te Zip Code OH 43607	City		1 -	
Anthony P. English  Street Address 2890 Wambli Drive  City Columbus  Street Address 164 North Harding Road  City Columbus  Employer/Occupation/Labor Organization*  Street Address 164 North Harding Road  City Columbus  Employer/Occupation/Labor Organization*  Stal te OH  Stal te Zip Code Form (Cash, Check, etc.) Check  Registration Number, if PAC  Stal te OH  Stal		OH	43215	
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$				Registration Number, if PAC
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		T		M D V Amount
Columbus  Full Name of Contributor Gayle Channing Tenenbaum  Street Address 164 North Harding Road  City Columbus  Full Name of Contributor Citizens With Ford  Street Address 1935 Shenandoah Ave.  Employer/Occupation/Labor Organization*  Stal te Zip Code OH 43209  City Columbus  Full Name of Contributor Citizens With Ford  Street Address 1935 Shenandoah Ave.  Employer/Occupation/Labor Organization*  Employer/Occupation/Labor Organization*  O 4 0 6 0 5 \$Amount OH		Employer/Occup	eation/Labor Organization*	0 4 0 6 0 5 \$300.00
Full Name of Contributor Gayle Channing Tenenbaum  Street Address 164 North Harding Road  City Columbus  Full Name of Contributor Citizens With Ford  Street Address 1935 Shenandoah Ave.  Employer/Occupation/Labor Organization*  Employer/Occupation/Labor Organization*  Employer/Occupation/Labor Organization*  Registration Number, if PAC  Form (Cash, Check, etc.)  Check  Registration Number, if PAC  Street Address 1935 Shenandoah Ave.  Employer/Occupation/Labor Organization*  M D G V D Amount Street Address 1935 Shenandoah Ave.  City Toledo  OH 43607  Form (Cash, Check, etc.) Check  Form (Cash, Check, etc.) Check  Amount Street Address Check  Check  Form (Cash, Check, etc.) Check	•		<sup>-</sup>	
Street Address 164 North Harding Road  City Columbus  Full Name of Contributor Citizens With Ford  Street Address 1935 Shenandoah Ave.  Employer/Occupation/Labor Organization*  Employer/Occupation/Labor Organization*  Stalte OH  Employer/Occupation/Labor Organization*  Employer/Occupation/Labor Organization*  Employer/Occupation/Labor Organization*  Employer/Occupation/Labor Organization*  Form (Cash, Check, etc.)  Amount \$1935 Shenandoah Ave.  City Toledo  OH  Stalte		OH	43219	
164 North Harding Road  City Columbus  Stal te OH A3209  Stal te OH A3209  Form (Cash, Check, etc.) Check  Form (Cash, Check, etc.) Check  Registration Number, if PAC  Street Address 1935 Shenandoah Ave.  Employer/Occupation/Labor Organization*  OH A3607  Form (Cash, Check, etc.) Check  Form (Cash, Check, etc.) Check  Form (Cash, Check, etc.) Check  Amount Stal te OH A3607  Form (Cash, Check, etc.) Check				Registration Number, if PAC
Columbus  OH 43209  check  Full Name of Contributor Citizens With Ford  Street Address 1935 Shenandoah Ave.  Employer/Occupation/Labor Organization*  O		Employer/Occupation/Labor Organization*		
Full Name of Contributor Citizens With Ford  Street Address 1935 Shenandoah Ave.  Employer/Occupation/Labor Organization*  M				
Citizens With Ford  Street Address 1935 Shenandoah Ave.  Employer/Occupation/Labor Organization*  O 4 0 6 0 5 \$1,000.00  City Toledo  OH 43607  Form (Cash, Check, etc.) check		OH	43209	
1935 Shenandoah Ave.  O 4 0 6 0 5 \$1,000.00  City Toledo  OH A3607  Form (Cash, Check, etc.) check		Registration Number, if PAC		
Toledo OH 43607 check		Employer/Occupation/Labor Organization*		
Full Name of Contributor Registration Number. if PAC				
Howard Heard	Full Name of Contributor Howard Heard	Registration Number, if PAC		
Street Address 1186 Geers Ave.  Employer/Occupation/Labor Organization*  M		Employer/Occup	oation/Labor Organization*	
City Columbus Stalte OH 43206 Form (Cash, Check, etc.) check	Columbus	OH	43206	check

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
	\$0.00
	Ψ0.00

Total expenditures this event.

\$0.00

Page Total \$ 1,825.00

<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 also appear. [R.C. 3517.10(B)(4)]