

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

Prescribed by Secretary of State 03/05

| | | | | |
|--|---|--------------------------|--|-------------------------|
| Name of Committee in Full Harris for School Board | | | | |
| Full Name of Contributor Andrew Bowers | | | Registration Number, if PAC | |
| Street Address 953 Neil Ave. | Employer/Occupation/Labor Organization* | | M D Y 10 21 09 | Amount 50.00 |
| City Columbus | State OH | Zip Code 43201 | Form (Cash, Check, etc.) check | |
| Full Name of Contributor Jeffrey A. Stankunas | | | Registration Number, if PAC | |
| Street Address 432 Highbanks Valley Dr. | Employer/Occupation/Labor Organization* | | M D Y 10 21 09 | Amount 150.00 |
| City Newark | State OH | Zip Code 43055 | Form (Cash, Check, etc.) check | |
| Full Name of Contributor D. Michael Gradhaus | | | Registration Number, if PAC | |
| Street Address 107 S. High St. # 450 | Employer/Occupation/Labor Organization* | | M D Y 10 21 09 | Amount 100.00 |
| City Columbus | State OH | Zip Code 43215 | Form (Cash, Check, etc.) check | |
| Full Name of Contributor William L. Stehle | | | Registration Number, if PAC | |
| Street Address 654 Crossing Creek South | Employer/Occupation/Labor Organization* | | M D Y 10 21 09 | Amount 50.00 |
| City Gahanna | State OH | Zip Code 43230 | Form (Cash, Check, etc.) check | |
| Full Name of Contributor Rich & Gillis Law Group LLC | | | Registration Number, if PAC | |
| Street Address 6400 Riverside Dr. Suite D | Employer/Occupation/Labor Organization* | | M D Y 10 21 09 | Amount 250.00 |
| City Dublin | State OH | Zip Code 43017 | Form (Cash, Check, etc.) check | |
| Full Name of Contributor | | | Registration Number, if PAC | |
| Street Address | Employer/Occupation/Labor Organization* | | M D Y | Amount |
| City | State OH | Zip Code | Form (Cash, Check, etc.) | |
| Full Name of Contributor | | | Registration Number, if PAC | |
| Street Address | Employer/Occupation/Labor Organization* | | M D Y | Amount |
| City | State OH | Zip Code | 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 also 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.

\$0.00**\$0.00**

Page Total \$

\$0.00