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

Event Date	May 19, 2005	_ ]
Page		

Prescribed by Secretary of State 03/0

Name of Committee in Full	Saurail Carrentit			
Kevin L. Boyce For Columbus City C	Jouncii Committ	ee	I STAGE	
Full Name of Contributor Robert J. Weiler, Jr.			Registration Number, if PAC	
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
41 South High Street, Suite 200			0 4 3 0 0 5 100.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	check	
Full Name of Contributor			Registration Number, if PAC	
Michael McCord				
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount	
			0 6 1 0 0 5 100.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH		cash	
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·		Registration Number, if PAC	
Janelle N. Simmons			No. 10 Managest	
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount 0 6 1 0 0 5 100.00	
2686 Bloom Drive	6.1.	Zip Code	0 6 1 0 0 5 100.00	
Calmahaa	Sta te	43219	check	
Columbus	OH	43213	Registration Number, if PAC	
Full Name of Contributor			Registration Number, II FAC	
Yvette Austin-Palmer		M D Y Amount		
Street Address 5723 Willowcreek Cir	Employer/Occupation/Labor Organization*		0 6 1 0 0 5 200.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43213	check	
Full Name of Contributor David Wiles			Registration Number, if PAC	
Street Address 7615 Sarah Lee	Employer/Occup	ation/Labor Organization*	0 6 1 0 0 5 Amount 250.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Concord Township	ОН	44077	check	
Full Name of Contributor Christie Angel			Registration Number, if PAC	
Street Address 600 South Grant Ave.	Employer/Occup	ation/Labor Organization*	0 <sup>M</sup> 6 1 0 0 5 Amount 100.00	
City Columbus	Starte OH	Zip Code 43206	Form (Cash, Check, etc.) Check	
Full Name of Contributor Derrick Clay			Registration Number, if PAC	
Street Address 7717 Early Meadows Road		oation/Labor Organization*	0 6 1 0 0 5 Amount 100.00	
City Westerville	Stal te OH	Zip Code 43082	Form (Cash, Check, etc.) Check	
	4.4 1 I C 1 A.		stor is self amployed the occupation and the name of	

Fill in the boxes below only on the last page for this event.

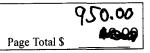
Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from No. 31-E" and list the date of the event in the date column

Total	contributions	this	event

\$0.00

Total expenditures this event.

\$0.00



<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)]