

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

Prescribed by Secretary of State 03/05

Name of Committee in Full				Registration Number, if PAC			
Kamhon-edie							
Full Name of Contributor				Registration Number, if PAC			
Ardelia Young							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
5776 Blendonbrook Ln				9	30	13	20.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus		OH	43230	CHECK #1312			
Full Name of Contributor				Registration Number, if PAC			
Belinda Wilson							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
183 Landsdowne Ave				9	30	13	10.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Gahanna		OH	43230	CASH			
Full Name of Contributor				Registration Number, if PAC			
Michael-Steven Frazier							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
6316 New London Dr.				9	30	13	10.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus		OH	43231	CASH			
Full Name of Contributor				Registration Number, if PAC			
Jackie Moncrief							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
1858 Riverdale Rd				9	30	13	30.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus		OH	43232	CASH			
Full Name of Contributor				Registration Number, if PAC			
Corey Humphries							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
8582 Wilbomar Ave				9	30	13	30.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Reynoldsburg		OH		CASH			
Full Name of Contributor				Registration Number, if PAC			
Michelle White							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
3121 McCutcheon Crossing				9	30	13	10.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus		OH	43219	CHECK #108			
Full Name of Contributor				Registration Number, if PAC			
Ahtilah Dulaney							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
1335 Fair Ave.				9	30	13	20.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus			43205	CASH			

* 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

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Total expenditures this event.

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Page Total \$ 310.00

SRS