

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

Prescribed by Secretary of State 03/05

16

Name of Committee in Full <i>Friends of Lori Ann Teibel</i>				
Full Name of Contributor <i>Lynne E.C. Smith</i>			Registration Number, if PAC	
Street Address <i>7809 Lambton Park Rd.</i>	Employer/Occupation/Labor Organization*		M <i>05</i>	D <i>02</i>
City <i>New Albany</i>	State <i>OH</i>	Zip Code <i>43054</i>	Y <i>13</i>	Amount <i>75.00</i>
Form (Cash, Check, etc.) <i>check</i>				
Full Name of Contributor <i>Christopher Zoeller</i>			Registration Number, if PAC	
Street Address <i>107 Oakbridge Park</i>	Employer/Occupation/Labor Organization*		M <i>05</i>	D <i>02</i>
City <i>Tiffin</i>	State <i>OH</i>	Zip Code <i>44883</i>	Y <i>13</i>	Amount <i>100.00</i>
Form (Cash, Check, etc.) <i>check</i>				
Full Name of Contributor <i>Kathleen Myers Ostrowski</i>			Registration Number, if PAC	
Street Address <i>7262 Rosegate Pl</i>	Employer/Occupation/Labor Organization*		M <i>05</i>	D <i>02</i>
City <i>Dublin</i>	State <i>OH</i>	Zip Code <i>43017</i>	Y <i>13</i>	Amount <i>200.00</i>
Form (Cash, Check, etc.) <i>check</i>				
Full Name of Contributor <i>Ronald L. Welch</i>			Registration Number, if PAC	
Street Address <i>1757 Longhill Dr.</i>	Employer/Occupation/Labor Organization*		M <i>05</i>	D <i>02</i>
City <i>Zanesville</i>	State <i>OH</i>	Zip Code <i>43701</i>	Y <i>13</i>	Amount <i>75.00</i>
Form (Cash, Check, etc.) <i>check</i>				
Full Name of Contributor <i>Rosemary Kohler</i>			Registration Number, if PAC	
Street Address <i>57 Granville St.</i>	Employer/Occupation/Labor Organization*		M <i>05</i>	D <i>02</i>
City <i>Gahanna</i>	State <i>OH</i>	Zip Code <i>43230</i>	Y <i>13</i>	Amount <i>150.00</i>
Form (Cash, Check, etc.) <i>check</i>				
Full Name of Contributor <i>Derek Snook</i>			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M <i>05</i>	D <i>02</i>
City	State	Zip Code	Y <i>13</i>	Amount <i>200.00</i>
Form (Cash, Check, etc.) <i>cash</i>				
Full Name of Contributor <i>Mark Collins</i>			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M <i>05</i>	D <i>02</i>
City	State	Zip Code	Y <i>13</i>	Amount <i>75.00</i>
Form (Cash, Check, etc.) <i>cash</i>				

* 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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<i>875.00</i>

Grand Total \$