

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Schottice for G C</u>				
Full Name of Contributor <u>Audry N. Hardy</u>			Registration Number, if PAC	
Street Address <u>4693 Heatherblend Ct</u>	Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>13</u>
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123-3489</u>	Y <u>15</u>	Amount <u>25.00</u>
Form (Cash, Check, etc.) <u>CK</u>				
Full Name of Contributor <u>Sandra Langer</u>			Registration Number, if PAC	
Street Address <u>3323 Park St.</u>	Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>11</u>
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	Y <u>15</u>	Amount <u>100.00</u>
Form (Cash, Check, etc.) <u>CK</u>				
Full Name of Contributor <u>Kate Clark</u>			Registration Number, if PAC	
Street Address <u>2769 Buxton Lane</u>	Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>12</u>
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	Y <u>15</u>	Amount <u>50.00</u>
Form (Cash, Check, etc.) <u>Cash</u>				
Full Name of Contributor <u>Joe Clark</u>			Registration Number, if PAC	
Street Address <u>2769 Buxton Lane</u>	Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>12</u>
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	Y <u>15</u>	Amount <u>50.00</u>
Form (Cash, Check, etc.) <u>Cash</u>				
Full Name of Contributor <u>Debra S. Hart-Cohen</u>			Registration Number, if PAC	
Street Address <u>824 S. High Street</u>	Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>12</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43206</u>	Y <u>15</u>	Amount <u>100.00</u>
Form (Cash, Check, etc.) <u>CK</u>				
Full Name of Contributor <u>Lloyd D. Cohen</u>			Registration Number, if PAC	
Street Address <u>1353 Pinnacle Club Drive</u>	Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>12</u>
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	Y <u>15</u>	Amount <u>100.00</u>
Form (Cash, Check, etc.) <u>CK</u>				
Full Name of Contributor <u>Robert K. Whittier</u>			Registration Number, if PAC	
Street Address <u>3233 Farmbrook Dr</u>	Employer/Occupation/Labor Organization*		M <u>10</u>	D <u>12</u>
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123-4802</u>	Y <u>15</u>	Amount <u>50.00</u>
Form (Cash, Check, etc.) <u>CK</u>				

* 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

<u>475.00</u>

Total expenditures this event.

<u>0.00</u>

Page Total \$ 475.00