Event Date	7/14/09
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Statement of Contributions Received at a Social or Fundraising Event

Donald M. Yore			of State 3/05	Secre	ed b	cribe	Presci					
Full Name of Contributor Donald M. Yore Street Address 1555 Hankinson Rd. City Granville Full Name of Contributor Linda J. Hummer Street Address 101 Northridge Rd. City Columbus Full Name of Contributor Lawrence N. O'Connor Street Address Full Name of Contributor Street Naddress Full Name of Contributor Employer/Occupation/Labor Organization* Street Address Full Name of Contributor Lawrence N. O'Connor Street Address Full Name of Contributor Stephen P. Campbell Street Address Full Name of Contributor Stephen P. Campbell Street Address Full Name of Contributor Stephen P. Campbell Street Address Full Name of Contributor Stephen P. Campbell Street Address Full Name of Contributor Stephen P. Campbell Street Address Full Name of Contributor Stephen P. Campbell Street Address Full Name of Contributor Stephen P. Campbell Street Address Full Name of Contributor Stephen P. Campbell Street Address Full Name of Contributor Full				Anna anna an				ittee in Full				
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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	
		Page Total \$550.00
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