

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

Prescribed by Secretary of State 03/05

Name of Committee in Full					
Full Name of Contributor <b>Roetzel &amp; Andress LPA</b>				Registration Number, if PAC	
Street Address <b>222 South Main Street</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   0   6   0   5</b>	Amount <b>\$150.00</b>
City <b>Akron</b>		State <b>OH</b>	Zip Code <b>44308</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>SBC Ohio Employee Political Action Committee</b>				Registration Number, if PAC	
Street Address <b>150 East Gay Steet, Room 4A</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   0   6   0   5</b>	Amount <b>\$1,000.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>Peter H. Edwards</b>				Registration Number, if PAC	
Street Address <b>495 South High Street, Suite 150</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   0   6   0   5</b>	Amount <b>\$150.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>Laurence G. Ruben</b>				Registration Number, if PAC	
Street Address <b>140 South Columbia Ave.</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   0   6   0   5</b>	Amount <b>\$150.00</b>
City <b>Bexley</b>		State <b>OH</b>	Zip Code <b>43209</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>George J. Kontogiannis</b>				Registration Number, if PAC	
Street Address <b>400 South Fifth Street, Suite 400</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   0   6   0   5</b>	Amount <b>\$150.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>John C. Rosenberger</b>				Registration Number, if PAC	
Street Address <b>804 City Park Ave.</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   0   6   0   5</b>	Amount <b>\$150.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43206</b>	Form (Cash, Check, etc.) <b>check</b>	
Full Name of Contributor <b>Thomas E. Szykowny</b>				Registration Number, if PAC	
Street Address <b>250 S. Parkview Ave.</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>0   4   0   6   0   5</b>	Amount <b>\$150.00</b>
City <b>Bexley</b>		State <b>OH</b>	Zip Code <b>43209</b>	Form (Cash, Check, etc.) <b>check</b>	

\* 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

**\$0.00**

Total expenditures this event.

**\$0.00**

Page Total \$ **\$1,900.00**