

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Mott &amp; Pleasnick</b>				Registration Number, if PAC			
Full Name of Contributor <b>Sloan Spaulding</b>				Registration Number, if PAC			
Street Address <b>7735 Sutton Pl</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	\$200.00
City <b>New Albany</b>		State <b>OH</b>	Zip Code <b>43054</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Brent Bradbury</b>				Registration Number, if PAC			
Street Address <b>5198 Hanover Close</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	\$100.00
City <b>New Albany</b>		State <b>OH</b>	Zip Code <b>43054</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>William Resch</b>				Registration Number, if PAC			
Street Address <b>5610 Morgan Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	\$150.00
City <b>New Albany</b>		State <b>OH</b>	Zip Code <b>43054</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>David Demers</b>				Registration Number, if PAC			
Street Address <b>7771 Cromwell End</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	\$125.00
City <b>New Albany</b>		State <b>OH</b>	Zip Code <b>43054</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Aaron Underhill</b>				Registration Number, if PAC			
Street Address <b>8000 Walton Parkway</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	\$125.00
City <b>New Albany</b>		State <b>OH</b>	Zip Code <b>43054</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Nancy Ferguson</b>				Registration Number, if PAC			
Street Address <b>4789 Yantis Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	\$500.00
City <b>New Albany</b>		State <b>OH</b>	Zip Code <b>43054</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Edward Fellows</b>				Registration Number, if PAC			
Street Address <b>7065 Maynard Pl</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	\$100.00
City <b>New Albany</b>		State <b>OH</b>	Zip Code <b>43054</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 \$ 1,300.00