

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Friends of Lori Ann Feibel</u>				
Full Name of Contributor <u>Oyauma M. Garrison</u>			Registration Number, if PAC	
Street Address <u>8033 Slate Park Ave.</u>	Employer/Occupation/Labor Organization*		M <u>0</u> D <u>5</u> Y <u>0213</u>	Amount <u>100.00</u>
City <u>Reynoldsburg</u>	State <u>OH</u>	Zip Code <u>43068</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Victoria W. Hayward</u>			Registration Number, if PAC	
Street Address <u>7057 Shetland St.</u>	Employer/Occupation/Labor Organization*		M <u>0</u> D <u>5</u> Y <u>0213</u>	Amount <u>100.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43235</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Darren S. Patton</u>			Registration Number, if PAC	
Street Address <u>504 Coriander Pl</u>	Employer/Occupation/Labor Organization*		M <u>0</u> D <u>5</u> Y <u>0213</u>	Amount <u>300.00</u>
City <u>Gahanna</u>	State <u>OH</u>	Zip Code <u>43230</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Lawrence Binsky</u>			Registration Number, if PAC	
Street Address <u>75 S. Cassingham Rd</u>	Employer/Occupation/Labor Organization*		M <u>0</u> D <u>5</u> Y <u>0213</u>	Amount <u>100.00</u>
City <u>Bexley</u>	State <u>OH</u>	Zip Code <u>43209</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Donald T. Feibel</u>			Registration Number, if PAC	
Street Address <u>10 Wiveliscombe</u>	Employer/Occupation/Labor Organization*		M <u>0</u> D <u>5</u> Y <u>0213</u>	Amount <u>150.00</u>
City <u>New Albany</u>	State <u>OH</u>	Zip Code <u>43054</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Samuel L. Norman</u>			Registration Number, if PAC	
Street Address <u>13349 Wellerley Dr.</u>	Employer/Occupation/Labor Organization*		M <u>0</u> D <u>5</u> Y <u>0213</u>	Amount <u>200.00</u>
City <u>Pickerington</u>	State <u>OH</u>	Zip Code <u>43147</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Marilyn J. Tomasi</u>			Registration Number, if PAC	
Street Address <u>2263 Sheringham Rd.</u>	Employer/Occupation/Labor Organization*		M <u>0</u> D <u>5</u> Y <u>0213</u>	Amount <u>75.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43220</u>	Form (Cash, Check, etc.) <u>check</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

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Total expenditures this event.

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<u>1025.00</u>
Base Total \$