

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Franklin County Democratic Lawyers Club PAC</u>					
Full Name of Contributor <u>Carol Wright</u>			Registration Number, if PAC		
Street Address <u>318 Bergen Ave</u>	Employer/Occupation/Labor Organization*		M <u>1</u>	D <u>0</u>	Y <u>4</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43206</u>	Amount <u>75.00</u>		
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>M. Elizabeth Gill</u>			Registration Number, if PAC		
Street Address <u>33 E Columbus St</u>	Employer/Occupation/Labor Organization*		M <u>1</u>	D <u>0</u>	Y <u>4</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43206</u>	Amount <u>75.00</u>		
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Bernadette Laughlin</u>			Registration Number, if PAC		
Street Address <u>7025 Brackerton Place</u>	Employer/Occupation/Labor Organization*		M <u>1</u>	D <u>0</u>	Y <u>4</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43235</u>	Amount <u>75.00</u>		
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Michael W. McElligott</u>			Registration Number, if PAC		
Street Address <u>511 E. Jefferson Pl.</u>	Employer/Occupation/Labor Organization*		M <u>1</u>	D <u>0</u>	Y <u>4</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43214</u>	Amount <u>75.00</u>		
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Cindi Sows Morehart</u>			Registration Number, if PAC		
Street Address <u>4063 Riverview Dr</u>	Employer/Occupation/Labor Organization*		M <u>1</u>	D <u>0</u>	Y <u>4</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43221</u>	Amount <u>75.00</u>		
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Friends of Rick Pfeiffer Committee</u>			Registration Number, if PAC		
Street Address <u>4619 Snow Meadow Dr</u>	Employer/Occupation/Labor Organization*		M <u>1</u>	D <u>0</u>	Y <u>4</u>
City <u>Grove City</u>	State <u>OH</u>	Zip Code <u>43123</u>	Amount <u>250.00</u>		
Form (Cash, Check, etc.) <u>Check</u>					
Full Name of Contributor <u>Richard A. Frye</u>			Registration Number, if PAC		
Street Address <u>1669 Roxbury Road</u>	Employer/Occupation/Labor Organization*		M <u>1</u>	D <u>0</u>	Y <u>4</u>
City <u>Upper Arlington</u>	State <u>OH</u>	Zip Code <u>43212</u>	Amount <u>225.00</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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Page Total \$ 850.00