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Event Date	08/06/09	
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05 Name of Committee in Full **GIBBS 4 KIDS COMMITTEE** Full Name of Contributor Registration Number, if PAC Michelle Mills Street Address Employer/Occupation/Labor Organization* Amount 2456 Ashpoint St. St. Stephens 0 8 0 6 0 9 50.00 Zip Code Form(Cash,Check,etc) Columbus $\cap \mid H$ 43219 Check Full Name of Contributor Registration Number, if PAC **Janelle Simmons** Street Address Employer/Occupation/Labor Organization* Amount 2686 Bloom Drive **Limited Brands** 0 8 0 6 0 9 50.00 State Zıp Code Form(Cash,Check,etc) Columbus 43219 $\cap \mid H$ Check Full Name of Contributor Registration Number, if PAC Charlene Greene Street Address Employer/Occupation/Labor Organization* 1599 E. Gates St. Retired 0 8 0 6 0 9 30.00 Zıp Code Form(Cash,Check,etc) Columbus H 43206 Check Full Name of Contributor Registration Number, if PAC Mark Bell Street Address Employer/Occupation/Labor Organization* 2058 Hovt St. 0|8|0|6|0|9 **US Government** 20.00 Zıp Code Form(Cash,Check,etc) Columbus Η 43219 Cash Full Name of Contributor Registration Number, if PAC Allen Huff Street Address Employer/Occupation/Labor Organization* D 3156 Falcon Bridge Drive 0 8 0 6 0 9 Neighborhood House 100.00 State Zıp Code Form(Cash,Check,etc) Columbus 43232 Check Full Name of Contributor Registration Number, if PAC Doris Calloway Moore Employer/Occupation/Labor Organization* 883 Schillingwood Drive Franklin County Children S 0 8 0 6 0 9 50.00 State Zip Code Form(Cash,Check,etc) Gahanna 43230 Check Full Name of Contributor Registration Number, if PAC Jayme Moore Street Address Employer/Occupation/Labor Organization* Amount 1632 Bryden Road 0|8|0|6|0|9 50.00 Zip Code Form(Cash,Check,etc) Columbus 43205 $O \mid H$ Check

* 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 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	Total expenditures this event		
		Page Total \$	350 00
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