

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

Prescribed by Secretary of State 03/05

Name of Committee in Full Reynoldsburg Republican Club				
Full Name of Contributor James Hood			Registration Number, if PAC	
Street Address 8490 Landseer	Employer/Occupation/Labor Organization*		M D Y 0 4 07 1 5	Amount \$200.00
City Reynoldsburg	State OH	Zip Code 43068	Form (Cash, Check, etc.) check	
Full Name of Contributor James & Muriel Patrick			Registration Number, if PAC	
Street Address 6800 Tanya Terrace	Employer/Occupation/Labor Organization*		M D Y 0 1 13 1 5	Amount \$20.00
City Reynoldsburg	State OH	Zip Code 43067	Form (Cash, Check, etc.) check	
Full Name of Contributor Richard Rohwing			Registration Number, if PAC	
Street Address 7651 Burkey	Employer/Occupation/Labor Organization*		M D Y 0 4 17 1 5	Amount \$50.00
City Reynoldsburg	State OH	Zip Code 43068	Form (Cash, Check, etc.) check	
Full Name of Contributor Citizens to Retain Hood			Registration Number, if PAC	
Street Address 13184 Brandon	Employer/Occupation/Labor Organization*		M D Y 0 4 20 1 5	Amount \$50.00
City Pickerington	State OH	Zip Code 43014	Form (Cash, Check, etc.) check	
Full Name of Contributor Bradley K Sinnott			Registration Number, if PAC	
Street Address 52 E Gay St	Employer/Occupation/Labor Organization*		M D Y 0 3 31 1 5	Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) check	
Full Name of Contributor Lauren & Marshall Spalding			Registration Number, if PAC	
Street Address 1940 Glenford	Employer/Occupation/Labor Organization*		M D Y 0 4 07 1 5	Amount \$100.00
City Reynoldsburg	State OH	Zip Code 43068	Form (Cash, Check, etc.) check	
Full Name of Contributor Patrick Zollars			Registration Number, if PAC	
Street Address 6928 Retton	Employer/Occupation/Labor Organization*		M D Y 0 4 03 1 5	Amount \$100.00
City Reynoldsburg	State OH	Zip Code 43068	Form (Cash, Check, etc.) 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 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

\$3,570.00

Total expenditures this event.

\$1,980.22

Page Total \$ **\$620.00**