

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

Prescribed by Secretary of State 03/05

Name of Committee in Full GIBBS 4 KIDS COMMITTEE				
Full Name of Contributor GLORIA A REDDING			Registration Number, if PAC	
Street Address 6157 MCNAUGHTEN GROVE LN	Employer/Occupation/Labor Organization* GENERATING LEARNING		M 1	D 0
City COLUMBUS	State OH	Zip Code 43213	Y 2	Amount 25.00
Form (Cash, Check, etc.) CHECK				
Full Name of Contributor BRANDY MOOREHEAD			Registration Number, if PAC	
Street Address 48 N 20TH ST	Employer/Occupation/Labor Organization* COLUMBUS URBAN LEA		M 1	D 0
City COLUMBUS	State OH	Zip Code 43203	Y 2	Amount 25.00
Form (Cash, Check, etc.) CHECK				
Full Name of Contributor ALETHEA E GADDIS			Registration Number, if PAC	
Street Address PO BOX 360832	Employer/Occupation/Labor Organization* GADDIS FOUNDATION		M 1	D 0
City COLUMBUS	State OH	Zip Code 43236	Y 1	Amount 25.00
Form (Cash, Check, etc.) CHECK				
Full Name of Contributor NANA WATSON			Registration Number, if PAC	
Street Address 1404 KENWICK RD	Employer/Occupation/Labor Organization* BISHOP HARTLEY		M 1	D 0
City COLUMBUS	State OH	Zip Code 43209	Y 2	Amount 20.00
Form (Cash, Check, etc.) CASH				
Full Name of Contributor JOHN T COATS			Registration Number, if PAC	
Street Address 6040 WHITMAN ROAD	Employer/Occupation/Labor Organization* MOBILE		M 1	D 0
City COLUMBUS	State OH	Zip Code 43213	Y 2	Amount 25.00
Form (Cash, Check, etc.) CASH				
Full Name of Contributor RAMONA R REYES			Registration Number, if PAC	
Street Address 6040 WHITMAN ROAD	Employer/Occupation/Labor Organization* NATIONWIDE INSURAN		M 1	D 0
City COLUMBUS	State OH	Zip Code 43213	Y 2	Amount 25.00
Form (Cash, Check, etc.) CASH				
Full Name of Contributor MICHAEL COLE			Registration Number, if PAC	
Street Address 6088 WHITMAN RD	Employer/Occupation/Labor Organization* COLUMBUS SCHOOL BO		M 1	D 0
City COLUMBUS	State OH	Zip Code 43232	Y 2	Amount 46.00
Form (Cash, Check, etc.) CASH				

* 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 \$ 191.00
