

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Paley for Columbus</b>				
Full Name of Contributor <b>Greg Kostelac</b>			Registration Number, if PAC	
Street Address <b>155 W. Main St. #803</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>Jeffrey &amp; M. Michelle Lewis</b>			Registration Number, if PAC	
Street Address <b>4474 Summit Ridge Dr.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43220</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Robin &amp; Norman Link</b>			Registration Number, if PAC	
Street Address <b>862 Ridenour Rd.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Gahanna</b>	State <b>OH</b>	Zip Code <b>43230</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>K. &amp; F. Majidzadeh</b>			Registration Number, if PAC	
Street Address <b>4621 Edgecote Ct.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	Y <b>1</b>	Amount <b>\$200.00</b>
Full Name of Contributor <b>John Marshall</b>			Registration Number, if PAC	
Street Address <b>324 Fallis Rd.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43214</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Robert McCarty</b>			Registration Number, if PAC	
Street Address <b>495 E. Mound St.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>Michael McElligott</b>			Registration Number, if PAC	
Street Address <b>511 E. Jeffrey Pl.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43214</b>	Y <b>1</b>	Amount <b>\$50.00</b>

\* 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 \$ **\$600.00**