Event Date	06/28/11
Page	1

Statement of Contributions Received at a Social or Fundraising Event

	Prescribed by Sec	cretary of State 3/05					
Name of Committee in Full							
Citizens for Maria Klemack			las s				
Full Name of Contributor		Registra	Registration Number, if PAC				
Miren M. Cadiz Street Address	Emmlass w/Occur	ution (Labor Opposization*	M		1 v	Amount	
	Employer/Occupation/Labor Organization*			D	Y 1	Amount	20.00
2627 Brunswick Dr.	State	Zip Code	0 6	2 8 ash,Checl			20.00
Grove City	h	43123		Checl			
Full Name of Contributor	<u> </u>	43123		Registration Number, if PAC			
Pedro J. Cadiz			1106				
Street Address	Employer/Occup	oation/Labor Organization*	М	D	Υ	Amount	
3350 Parkbrook Dr.	Empreyer seexpanses are significant.		0.6	2 8	1 1		20.00
City	State	Zip Code		ash,Checl			
Grove City	O h	43123		Checl	k		
Full Name of Contributor	1 12	<u> </u>	Registra	tion Num	ber, if P	١C	
Frederick L. Hayes							
Street Address	Employer/Occup	oation/Labor Organization*	М	D	Y	Amount	
2619 Queensway Dr.			0.6	2.8	1.1	ļ.	25.00
City	State	Zip Code	1	sh,Checl			
Grove City	$\int O \cdot h$	43123		Checl			
Full Name of Contributor			Registra	tion Nun	ber, if P	AC.	
Joseph L. Mas			_				
Street Address	Employer/Occup	oation/Labor Organization*	M	D	Y	Amount	
330 South High St.	ļ			2 8			100.00
City	State	Zip Code	1	ash,Checi			
Columbus	O, h	43125		Chec			
Full Name of Contributor			Registra	tion Num	iber, if P	1C	
Michael Uhrin Street Address	lr 1. 10.	pation/Labor Organization*	M	l n	1 v	I	
	Lmployer/Occup	nation/Labor Organization		D	Y 1 1	Amount	50.00
5580 Meadow Grove Dr.	State	Zip Code		28 ash,Chec			30.00
Grove City	O h	43123	1				
Full Name of Contributor	() 11	131.23	Check Registration Number, if PAC				
4 Cash Contributions under \$25			l'iogisiii		1001, 1171		
Street Address	Employer/Occur	pation/Labor Organization*	M	D	Y	Amount	
			0.6	2 8	1		68.71
	State	Zip Code		ash,Chec			. ,
l '		'	1	Cash	1		
Full Name of Contributor	<u> </u>	-l	Registra	tion Nun		AC .	•
Maria C. Capocciama							
Street Address	Employer/Occup	pation/Labor Organization*	М	D	Y	Amount	
1675 Borroe Rd.			0 6	2.8	1.1		20.00
City	State	Zip Code		ash,Chec	k,etc)		
Grove City	O h	43123		Chec	k		7, 1
		edidates. If governbytor is suff-e	1 . 1 . 1				.1.

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 \$	303.71
265.00	100.00		00011
20.7.00	L. ICAJ.CAJ		

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)]