31-E

R.C. 3517.10(B)

Event Date 10/03/17

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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					
Citizens Committee for Persons with DD					
Full Name of Contributor			**Registration Number, if PAC**		
Mary K Long					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**		**Amount**
366 E Selby Blvd	N/A		10/03/17		40.00
City	**State**	**Zip Code**	**Form (Cash, Check, etc)**		
Worthington	OH	43085	check		
Full Name of Contributor			**Registration Number, if PAC**		
Laura B. Monogold					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**		**Amount**
856 Northwest Blvd	N/A		10/03/17		40.00
City	**State**	**Zip Code**	**Form (Cash, Check, etc)**		
Columbus	OH	43212	check		
Full Name of Contributor			**Registration Number, if PAC**		
The Ohio State University, Blankenship Hall, Room 2010					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**		**Amount**
901 Woody Hayes Drive	N/A		10/03/17		5,000.00
City	**State**	**Zip Code**	**Form (Cash, Check, etc)**		
Columbus	OH	43210	check		
Full Name of Contributor			**Registration Number, if PAC**		
Kathleen J. Bernon					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**		**Amount**
131 E Livingston	N/A		10/03/17		40.00
City	**State**	**Zip Code**	**Form (Cash, Check, etc)**		
Columbus	OH	43215	check		
Full Name of Contributor			**Registration Number, if PAC**		
L. C. Alexander					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**		**Amount**
1232 Park Dr	N/A		10/03/17		40.00
City	**State**	**Zip Code**	**Form (Cash, Check, etc)**		
Gahanna	OH	43230	check		
Full Name of Contributor			**Registration Number, if PAC**		
Susan J. Titus					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**		**Amount**
5542 Covington Meadows Dr	N/A		10/03/17		120.00
City	**State**	**Zip Code**	**Form (Cash, Check, etc)**		
Westerville	OH	43082	check		
Full Name of Contributor			**Registration Number, if PAC**		
Lisa K. Barker					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**		**Amount**
2023 Harwitch Rd	N/A		10/03/17		40.00
City	**State**	**Zip Code**	**Form (Cash, Check, etc)**		
Columbus	OH	43221	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 $ 5,320.00