

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

Prescribed by Secretary of State 03/05

Carbin's

|                                                                             |  |                                         |                          |                                   |                |                |
|-----------------------------------------------------------------------------|--|-----------------------------------------|--------------------------|-----------------------------------|----------------|----------------|
| Name of Committee in Full<br><b>Citizens for Lane</b>                       |  |                                         |                          |                                   |                |                |
| Full Name of Contributor<br><b>Diana Harrison Forrester</b>                 |  |                                         |                          | Registration Number, if PAC       |                |                |
| Street Address<br><b>4673 Clayburn Ct.</b>                                  |  | Employer/Occupation/Labor Organization* |                          | M<br><b>10</b>                    | D<br><b>17</b> | Y<br><b>15</b> |
| City<br><b>Grove City</b>                                                   |  | State<br><b>OH</b>                      | Zip Code<br><b>43123</b> | Amount<br><b>100<sup>00</sup></b> |                |                |
| Form (Cash, Check, etc.)<br><b>ck</b>                                       |  |                                         |                          |                                   |                |                |
| Full Name of Contributor<br><b>Daphne Hawk</b>                              |  |                                         |                          | Registration Number, if PAC       |                |                |
| Street Address<br><b>2374 White Rd</b>                                      |  | Employer/Occupation/Labor Organization* |                          | M<br><b>10</b>                    | D<br><b>17</b> | Y<br><b>15</b> |
| City<br><b>Grove City</b>                                                   |  | State<br><b>OH</b>                      | Zip Code<br><b>43123</b> | Amount<br><b>100<sup>00</sup></b> |                |                |
| Form (Cash, Check, etc.)<br><b>ck</b>                                       |  |                                         |                          |                                   |                |                |
| Full Name of Contributor<br><b>Janet T. Routh</b>                           |  |                                         |                          | Registration Number, if PAC       |                |                |
| Street Address<br><b>4677 Hirth Hill Rd W.</b>                              |  | Employer/Occupation/Labor Organization* |                          | M<br><b>10</b>                    | D<br><b>17</b> | Y<br><b>15</b> |
| City<br><b>Grove City</b>                                                   |  | State<br><b>OH</b>                      | Zip Code<br><b>43123</b> | Amount<br><b>50<sup>00</sup></b>  |                |                |
| Form (Cash, Check, etc.)<br><b>ck</b>                                       |  |                                         |                          |                                   |                |                |
| Full Name of Contributor<br><b>Nancy B. Patzer</b>                          |  |                                         |                          | Registration Number, if PAC       |                |                |
| Street Address<br><b>3639 Orders Rd</b>                                     |  | Employer/Occupation/Labor Organization* |                          | M<br><b>10</b>                    | D<br><b>17</b> | Y<br><b>15</b> |
| City<br><b>Grove City</b>                                                   |  | State<br><b>OH</b>                      | Zip Code<br><b>43123</b> | Amount<br><b>25<sup>00</sup></b>  |                |                |
| Form (Cash, Check, etc.)<br><b>ck</b>                                       |  |                                         |                          |                                   |                |                |
| Full Name of Contributor<br><b>Mark E. Cooper</b>                           |  |                                         |                          | Registration Number, if PAC       |                |                |
| Street Address<br><b>6214 Brookmeade Circle</b>                             |  | Employer/Occupation/Labor Organization* |                          | M<br><b>10</b>                    | D<br><b>17</b> | Y<br><b>15</b> |
| City<br><b>Grove City</b>                                                   |  | State<br><b>OH</b>                      | Zip Code<br><b>43123</b> | Amount<br><b>50<sup>00</sup></b>  |                |                |
| Form (Cash, Check, etc.)<br><b>ck</b>                                       |  |                                         |                          |                                   |                |                |
| Full Name of Contributor<br><b>E. Michael Spiers</b>                        |  |                                         |                          | Registration Number, if PAC       |                |                |
| Street Address<br><b>6173 Seneca Ct.</b>                                    |  | Employer/Occupation/Labor Organization* |                          | M<br><b>10</b>                    | D<br><b>17</b> | Y<br><b>15</b> |
| City<br><b>Grove City</b>                                                   |  | State<br><b>OH</b>                      | Zip Code<br><b>43123</b> | Amount<br><b>25<sup>00</sup></b>  |                |                |
| Form (Cash, Check, etc.)<br><b>ck</b>                                       |  |                                         |                          |                                   |                |                |
| Full Name of Contributor<br><b>Stage As-Mann, Benjamin R. Brack, Turner</b> |  |                                         |                          | Registration Number, if PAC       |                |                |
| Street Address<br><b>4090 Naughton Rd</b>                                   |  | Employer/Occupation/Labor Organization* |                          | M<br><b>10</b>                    | D<br><b>17</b> | Y<br><b>15</b> |
| City<br><b>Grove City</b>                                                   |  | State<br><b>OH</b>                      | Zip Code<br><b>43123</b> | Amount<br><b>200<sup>00</sup></b> |                |                |
| Form (Cash, Check, etc.)<br><b>ck</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

|  |  |
|--|--|
|  |  |
|--|--|

Total expenditures this event.

|  |  |
|--|--|
|  |  |
|--|--|

Page Total \$

550<sup>00</sup>