

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

Prescribed by Secretary of State 03/05

Event Date 5-22-09

Page 2

15

Name of Committee in Full		Registration Number, if PAC	
Citizens for Frank Ciotola			
Full Name of Contributor		M D Y Amount	
Kathleen B. Mueller		0 5 2 2 0 9 \$100.00	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	
1283 Castleton Rd. N		Check	
City	State Zip Code	Registration Number, if PAC	
Columbus	OH 43220		
Full Name of Contributor		M D Y Amount	
Scott Everhart		0 5 2 2 0 9 \$75.00	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	
6426 Newgrange Drive		Check	
City	State Zip Code	Registration Number, if PAC	
Dublin	OH 43016		
Full Name of Contributor		M D Y Amount	
Nicholas D. Schooley		0 5 2 2 0 9 \$100.00	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	
2235 Picket Post Lane		Check	
City	State Zip Code	Registration Number, if PAC	
Columbus	OH 43220		
Full Name of Contributor		M D Y Amount	
David A. Herd		0 5 2 2 0 9 \$100.00	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	
4615 Elan Ct.		Check	
City	State Zip Code	Registration Number, if PAC	
Columbus	OH 43220		
Full Name of Contributor		M D Y Amount	
Jennifer A. Schoning		0 5 2 2 0 9 \$100.00	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	
3765 Waldo Place		Check	
City	State Zip Code	Registration Number, if PAC	
Upper Arlington	OH 43220		
Full Name of Contributor		M D Y Amount	
Daniel McCormick		0 5 2 2 0 9 \$100.00	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	
3800 Ritamarie Drive		Check	
City	State Zip Code	Registration Number, if PAC	
Columbus	OH 43220		
Full Name of Contributor		M D Y Amount	
William E. Gabel		0 5 2 2 0 9 \$250.00	
Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	
2140 N. Parkway Drive		Check	
City	State Zip Code	Registration Number, if PAC	
Upper Arlington	OH 43221-3714		

* 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

\$825.00

Page Total \$ 0.00