31-E R.C. 3517.10(B)

Event Date	12/14/09
Page	1

Statement of Contributions Received at a Social or Fundraising Event

	Prescribed by S	Prescribed by Secretary of State 3:05						
Name of Committee in Full Committee to Save Senior	Sarvicas							
Full Name of Contributor	Services	Vices			Registration Number, if PAC			
Contibutors of \$25 or less.								
Street Address	Employer Occu	Employer Occupation/Labor Organization*		D	Y	Amount 255.00		
Cîty	State	Zip Code	Form(Cash.Chec				
Full Name of Contributor			Registr	ation Nur	nber, if F			
Street Address	Employer. Occu	pation/Labor Organization*	М	D	Y	Amount		
City	State	Zip Code	Form(C	ash,Chec	k.etc)			
Full Name of Contributor	·		Registr	ation Nur	nber, if P	PAC		
Street Address	Employer/Occu	pation/Labor Organization*	М	D	Y	Amount		
City	State	Zip Code	Form(Cash,Check,etc)					
Full Name of Contributor			Registr	ation Nun	nber, if P	'AC		
Street Address	Employer Occu	Employer/Occupation/Labor Organization*		D	Y	Amount		
City	State	Zip Code	Form(Cash.Check.etc)					
Full Name of Contributor		•	Registr	ation Nun	nber, if P	AĈ		
Street Address	Employer, Occu	Employer Occupation Labor Organization*		D	Y	Amount		
City	State	Zip Code	Form(Cash.Check.etc)		k.etc)			
Full Name of Contributor	·		Registra	tion Nur	ber, if P.	AC		
Street Address	Employer Occu	Employer Occupation/Labor Organization*		D	Y	Amount		
City	State	Zip Code	Form(C	ash.Check	c.etc)			
Full Name of Contributor	•		Registra	nion Num	ber, if Pa	AC		
Street Address	Employer Occup	Employer-Occupation/Labor Organization*		D	Y	Amount		
City	State	Zip Code	Form(C	ash.Checl	.etc)			

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	Fotal expenditures this event	
		Page Total \$255.00_

^{*} 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)]