31-E
R.C. 3517.10(B)

Event Date 11/03/10
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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 D.D.					
Full Name of Contributor			**Registration Number, if PAC**		
Lia Lofreso					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**	
7818 Emerald Place	N/A		10 20 10	80.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**		
Lewis Center	OH	43035	check		
Full Name of Contributor			**Registration Number, if PAC**		
Larry Macintosh					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**	
4341 Shelbourne Ln.	N/A		10 26 10	80.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**		
Columbus	OH	43220	check		
Full Name of Contributor			**Registration Number, if PAC**		
John K. Brownley					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**	
5703 Concord Hill Drive	N/A		11 03 10	160.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**		
Columbus	OH	43213	check		
Full Name of Contributor			**Registration Number, if PAC**		
Kami Darling					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**	
1474 Bridgeton Dr.			11 01 10	40.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**		
Upper Arlington	OH	43220	check		
Full Name of Contributor			**Registration Number, if PAC**		
Linda G. Flemming					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**	
5703 Concord Hill Drive	N/A		11 01 10	80.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**		
Columbus	OH	43054	check		
Full Name of Contributor			**Registration Number, if PAC**		
Martin J. Kerscher					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**	
768 Citation Ct	N/A		11 01 10	40.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**		
Gahanna	OH	43230	check		
Full Name of Contributor			**Registration Number, if PAC**		
Pamela Smith					
Street Address	**Employer/Occupation/Labor Organization***		**M D Y**	**Amount**	
8000 Oakwind Ct.	N/A		10 13 10	40.00	
City	**State**	**Zip Code**	**Form(Cash,Check,etc)**		
Westerville	OH	43081	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 $ 520.00