Event Date 3/18/15	
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## **Statement of Contributions Received** at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens To Retain Hood	•		
Full Name of Contributor The Sharp Law Firm, LLC - Marianne	Sharp Bernardo		Registration Number, if PAC
Street Address 133 E. Livingston Ave.	Employer/Occup.	ation/Labor Organization*	M D Y Amount \$100.00
City Columbus	Sta te OH	Zip Code 43215	Form (Cash, Check, etc.) check
Full Name of Contributor Sean H. Maxfield	· · · · · · · · · · · · · · · · · · ·	····	Registration Number, if PAC
Street Address 825 S. Front St.	Employer/Occup	ation/Labor Organization*	0 3 1 8 1 5 \$50.00
City Columbus	Sta te OH	Zip Code 43206	Form (Cash, Check, etc.) Check
Full Name of Contributor  Joshua E. Hall			Registration Number, if PAC
Street Address 825 S. Front St.	Employer/Occup:	ation/Labor Organization*	0 3 1 8 1 5 \$100.00
City Columbus	Sta_te OH	Zip Code 43206	Form (Cash, Check, etc.) Check
Full Name of Contributor Vassy Law Office - Nick Vassy	<del></del>		Registration Number, if PAC
Street Address 145 E. Rich St.	Employer/Occupa	ation/Labor Organization*	M D Y Amount \$100.00
City Columbus	Sta te OH	Zip Code 43215	Form (Cash, Check, etc.) Check
Full Name of Contributor Philip B. Kaufman	***		Registration Number, if PAC
Street Address 492 S. High St., Ste. 200	Employer/Occupa	ation/Labor Organization*	0 3 1 8 1 5 Amount \$50.00
City Columbus	Sta te OH	Zip Code 43215	Form (Cash, Check, etc.) Check
Full Name of Contributor David P. Rieser			Registration Number, if PAC
Street Address 2 Miranova PI., Ste. 710	Employer/Occupa	ation/Labor Organization*	0 3 1 8 1 5 Amount \$100.00
City Columbus	Sta te OH	Zip Code 43215	Form (Cash, Check, etc.) check
Full Name of Contributor Gregg D. Slemmer			Registration Number, if PAC
Street Address 1188 S. HighSt.		ation/Labor Organization*	0 3 1 8 1 5 Amount \$100.00
City Columbus	Sta te OH	Zip Code 43206	Form (Cash, Check, etc.) Check

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.
\$0.00	\$0.00

Page Total S \$600.00
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<sup>\*</sup> 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)]