

# Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Yassenoff</b>							
Full Name of Contributor <b>Nicholas Coenen</b>				Registration Number, if PAC			
Street Address <b>857 City Park Avenue</b>	Employer/Occupation/Labor Organization* <b>Best Effort</b>		M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>100.00</b>	
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>H 43206</b>	Form(Cash, Check, etc) <b>Check</b>				
Full Name of Contributor <b>Donald Thibaut</b>				Registration Number, if PAC			
Street Address <b>688 Mohawk Street</b>	Employer/Occupation/Labor Organization* <b>Credo Company</b>		M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>250.00</b>	
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>H 43206</b>	Form(Cash, Check, etc) <b>Check</b>				
Full Name of Contributor <b>Melissa Vasil</b>				Registration Number, if PAC			
Street Address <b>300 Hinman Avenue</b>	Employer/Occupation/Labor Organization* <b>Ecot Inc.</b>		M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>250.00</b>	
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>H 43207</b>	Form(Cash, Check, etc) <b>Check</b>				
Full Name of Contributor <b>Jessica Lager</b>				Registration Number, if PAC			
Street Address <b>1945 Wyandotte Road</b>	Employer/Occupation/Labor Organization* <b>IQ Inc.</b>		M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>250.00</b>	
City <b>Upper Arlington</b>	State <b>O</b>	Zip Code <b>H 43212</b>	Form(Cash, Check, etc) <b>Check</b>				
Full Name of Contributor <b>Steven Sellers</b>				Registration Number, if PAC			
Street Address <b>4488 Anglebrook Drive</b>	Employer/Occupation/Labor Organization* <b>IQ Inc.</b>		M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>100.00</b>	
City <b>Grove City</b>	State <b>O</b>	Zip Code <b>H 43123</b>	Form(Cash, Check, etc) <b>Check</b>				
Full Name of Contributor <b>Matt Ottiger</b>				Registration Number, if PAC			
Street Address <b>280 East Columbus Street</b>	Employer/Occupation/Labor Organization* <b>Best Effort</b>		M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>50.00</b>	
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>H 43206</b>	Form(Cash, Check, etc) <b>Check</b>				
Full Name of Contributor				Registration Number, if PAC			
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount	
City	State	Zip Code	Form(Cash, Check, etc)				

\* 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

1,000.00

Total expenditures this event

0.00

Page Total \$ 1,000.00