

# Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full <b>Citizens for Dorrian Committee</b>				
Full Name of Contributor <b>Crabbe Brown &amp; James</b>			Registration Number, if PAC	
Street Address <b>500 S Front St STE 1200</b>	Employer/Occupation/Labor Organization* <b>Attorney</b>		M   D   Y <b>0   1   19   0   5</b>	Amount <b>500.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Bricker &amp; Eckler LLP</b>			Registration Number, if PAC <b>#OH 821</b>	
Street Address <b>100 S Third St</b>	Employer/Occupation/Labor Organization* <b>Attorney</b>		M   D   Y <b>0   1   24   0   5</b>	Amount <b>5,000.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Donald S. Klco</b>			Registration Number, if PAC	
Street Address <b>225 E North Broadway</b>	Employer/Occupation/Labor Organization* <b>Anhueser Busch</b>		M   D   Y <b>0   1   28   0   5</b>	Amount <b>100.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43214</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>The Huntington Bancshares Inc</b>			Registration Number, if PAC <b>HBI-PAC C00165589</b>	
Street Address <b>41 S High St</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   1   11   0   5</b>	Amount <b>1,250.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Citizens for Sensenbrenner</b>			Registration Number, if PAC	
Street Address <b>3363 Tremont Rd STE 104C</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   1   27   0   5</b>	Amount <b>500.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43221</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Fraternal Order of Police</b>			Registration Number, if PAC	
Street Address <b>520 S High St</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   1   26   0   5</b>	Amount <b>500.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Ronald W Eifert</b>			Registration Number, if PAC	
Street Address <b>7052 Lansdowne St.</b>	Employer/Occupation/Labor Organization* <b>Korda Nemeth Engineer</b>		M   D   Y <b>0   1   27   0   5</b>	Amount <b>250.00</b>
City <b>Worthington</b>	State <b>O   H</b>	Zip Code <b>43085</b>	Form(Cash,Check,etc) <b>Check</b>	

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ **8,100.00**