

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Hawk</b>					
Full Name of Contributor <b>Anne Petit</b>				Registration Number, if PAC	
Street Address <b>161 Alton Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>	Y <b>1612</b>
City <b>Galloway</b>	State <b>OH</b>	Zip Code <b>43119</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$300.00</b>
Full Name of Contributor <b>Julie Morgan</b>				Registration Number, if PAC	
Street Address <b>6476 Oakhurst Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>	Y <b>1612</b>
City <b>Grove City</b>	State <b>OH</b>	Zip Code <b>43123</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$200.00</b>
Full Name of Contributor <b>Marianne Collins</b>				Registration Number, if PAC	
Street Address <b>423 Hickory Ln</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>	Y <b>1612</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$100.00</b>
Full Name of Contributor <b>Joyce Rinehart</b>				Registration Number, if PAC	
Street Address <b>1861 Zollinger Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>	Y <b>1612</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$75.00</b>
Full Name of Contributor <b>Ann Hunger</b>				Registration Number, if PAC	
Street Address <b>1033 Newfields Ln</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>	Y <b>1612</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$50.00</b>
Full Name of Contributor <b>Debra King</b>				Registration Number, if PAC	
Street Address <b>5655 Hardwell Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>	Y <b>1612</b>
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$25.00</b>
Full Name of Contributor <b>Cynthia Mattiacey</b>				Registration Number, if PAC	
Street Address <b>1219 Parkway N</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>2</b>	Y <b>1612</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43212</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$25.00</b>

\* 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)]

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-B" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$ **\$775.00**