

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

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Hawk				
Full Name of Contributor James Longerbone			Registration Number, if PAC	
Street Address 2619 Rustling Oak Blvd	Employer/Occupation/Labor Organization*		M D Y 0 8 0 9 1 2	Amount \$50.00
City Hilliard	State OH	Zip Code 43026	Form (Cash, Check, etc.) Check	
Full Name of Contributor Frank Ciotola			Registration Number, if PAC	
Street Address 2707 Lear Rd	Employer/Occupation/Labor Organization*		M D Y 0 8 0 9 1 2	Amount \$250.00
City Columbus	State OH	Zip Code 43220	Form (Cash, Check, etc.) Check	
Full Name of Contributor Shannon Hay			Registration Number, if PAC	
Street Address 3280 Belgreen Dr	Employer/Occupation/Labor Organization*		M D Y 0 8 0 9 1 2	Amount \$300.00
City Grove City	State OH	Zip Code 43123	Form (Cash, Check, etc.) Check	
Full Name of Contributor Kaltenbach Law LLC; c/o Jerry Kaltenbach			Registration Number, if PAC	
Street Address 4656 Executive Dr	Employer/Occupation/Labor Organization*		M D Y 0 8 0 9 1 2	Amount \$100.00
City Columbus	State OH	Zip Code 43220	Form (Cash, Check, etc.) Check	
Full Name of Contributor Charles McClenaghan			Registration Number, if PAC	
Street Address 5080 Tuttle Crossing Blvd	Employer/Occupation/Labor Organization*		M D Y 0 8 0 9 1 2	Amount \$50.00
City Dublin	State OH	Zip Code 43016	Form (Cash, Check, etc.) Check	
Full Name of Contributor Harris McClellan Binau & Cox; c/o Dan Binau			Registration Number, if PAC	
Street Address 37 W Broad St	Employer/Occupation/Labor Organization*		M D Y 0 8 0 9 1 2	Amount \$50.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor JP Morgan Chase PAC			Registration Number, if PAC COO128512	
Street Address 10 S Dearborn St	Employer/Occupation/Labor Organization*		M D Y 0 8 1 0 1 2	Amount \$500.00
City Chicago	State IL	Zip Code 60603	Form (Cash, Check, etc.) 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 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-E" 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 \$ **\$1,300.00**