31-A
R.C. 3517.10

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full: Citizens for a Safer Community

Full Name of Contributor	Registration Number, if PAC	Street Address	Employer/Occupation/Labor Organization*	City	State	Zip Code	M	D	Y	Form (Cash, Check, etc.)	Amount
Nationwide Mutual Insurance Company		1 Nationwide Plaza		Columbus	OH	43054	04	02	15	check	$2,500.00
Luitpold Pharmaceuticals		6610 New Albany Road E		New Albany	OH	43054	04	08	15	check	$1,000.00
					OH						
					OH						
					OH						
					OH						
					OH						
					OH						

* 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)]

Page Total $3,500.00