31-E
R.C. 3517.10(B)

Event Date 10/04/11
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full					
Citizens Committee for Persons with D.D.					
Full Name of Contributor			Registration Number, if PAC		
Phil C Shaffer					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
2433 Hankinson Road	N/A		10 04 11	640.00	
City	State	Zip Code	Form (Cash, Check, etc)		
Granville	OH	43023	check		
Full Name of Contributor			Registration Number, if PAC		
Early Childhood Education					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
2879 Johnstown Road	N/A		10 04 11	640.00	
City	State	Zip Code	Form (Cash, Check, etc)		
Columbus	OH	43219	check		
Full Name of Contributor			Registration Number, if PAC		
Jack F. Beatty					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
10405 Jerome Road	N/A		10 04 11	560.00	
City	State	Zip Code	Form (Cash, Check, etc)		
Plain City	OH	43064	check		
Full Name of Contributor			Registration Number, if PAC		
John K Brownley					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
5703 Concord Hill Drive	N/A		10 04 11	160.00	
City	State	Zip Code	Form (Cash, Check, etc)		
Columbus	OH	43213	check		
Full Name of Contributor			Registration Number, if PAC		
Total Homecare Solutions - Columbus LLC					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
8170 Corporate Park Drive, Suite 100	N/A		10 04 11	200.00	
City	State	Zip Code	Form (Cash, Check, etc)		
Cincinnatti	OH	45242	check		
Full Name of Contributor			Registration Number, if PAC		
West Central School Parent Group					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
1481 Town Street	N/A		10 04 11	240.00	
City	State	Zip Code	Form (Cash, Check, etc)		
Columbus	OH	43223	check		
Full Name of Contributor			Registration Number, if PAC		
Darlene W. Rankin					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
6082 Quin Abbey Court W.	N/A		10 04 11	320.00	
City	State	Zip Code	Form (Cash, Check, etc)		
Dublin	OH	43017	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 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 $ 2,760.00