

## 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 RANKIN</b>					
Full Name of Contributor <b>Baker &amp; Hostetler LLP PAC</b>				Registration Number, if PAC <b>OH125</b>	
Street Address <b>3200 National City Center</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>05</b>
City <b>Cleveland</b>	State <b>OH</b>	Zip Code <b>44114</b>	Amount <b>500.00</b>		Form(Cash,Check,etc) <b>check</b>
Full Name of Contributor <b>D. Lee Johnson</b>				Registration Number, if PAC	
Street Address <b>3335 Meijer Drive, Suite 200</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>05</b>
City <b>Toledo</b>	State <b>OH</b>	Zip Code <b>43617</b>	Amount <b>250.00</b>		Form(Cash,Check,etc) <b>check</b>
Full Name of Contributor <b>Bernard M. Floetker</b>				Registration Number, if PAC	
Street Address <b>1295 S. High St.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>05</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Amount <b>50.00</b>		Form(Cash,Check,etc) <b>check</b>
Full Name of Contributor <b>Barry H. Wolinetz</b>				Registration Number, if PAC	
Street Address <b>2785 Powell</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>05</b>
City <b>Bexley</b>	State <b>OH</b>	Zip Code <b>43209</b>	Amount <b>250.00</b>		Form(Cash,Check,etc) <b>check</b>
Full Name of Contributor <b>Frank L. Demos</b>				Registration Number, if PAC	
Street Address <b>7370 Sawmill Road</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>05</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43235</b>	Amount <b>250.00</b>		Form(Cash,Check,etc) <b>check</b>
Full Name of Contributor <b>Bricker &amp; Eckler LLP State Political Action Committee</b>				Registration Number, if PAC <b>OH821</b>	
Street Address <b>100 S. Third Street</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>05</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Amount <b>250.00</b>		Form(Cash,Check,etc) <b>check</b>
Full Name of Contributor				Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M	D	Y
City	State	Zip Code	Amount		Form(Cash,Check,etc)

\* 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 \$ 1,550.00