31-E

R.C. 3517.10(B)

Event Date 10/03/17

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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 DD

Full Name of Contributor	Registration Number, if PAC					
Jill M. Hicks						
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount	
8657 Olenbrook Drive	N/A	10	03	17	80.00	
City	State / Zip Code	Form (Cash, Check, etc)				
Lewis Center	OH 43035	check				
Full Name of Contributor	Registration Number, if PAC					
Debra L Viney						
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount	
1593 Middlecoff Ct	N/A	10	03	17	160.00	
City	State / Zip Code	Form (Cash, Check, etc)				
Columbus	OH 43228	check				
Full Name of Contributor	Registration Number, if PAC					
Timothy M Ryan Jr						
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount	
4504 Carrington Way	N/A	10	03	17	80.00	
City	State / Zip Code	Form (Cash, Check, etc)				
Hilliard	OH 43026	check				
Full Name of Contributor	Registration Number, if PAC					
Creative Housing, Inc.						
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount	
2233 Citygate Drive	N/A	10	03	17	10,000.00	
City	State / Zip Code	Form (Cash, Check, etc)				
Columbus	OH 43219	check				
Full Name of Contributor	Registration Number, if PAC					
Gwynn Kinsel						
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount	
388 Greencamp Dr	N/A	10	03	17	40.00	
City	State / Zip Code	Form (Cash, Check, etc)				
Columbus	OH 43235	check				
Full Name of Contributor	Registration Number, if PAC					
Angela R Franke						
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount	
2453 Bridlewood Court	N/A	10	03	17	40.00	
City	State / Zip Code	Form (Cash, Check, etc)				
Columbus	OH 43207	check				
Full Name of Contributor	Registration Number, if PAC					
Diane L. Dobrea						
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	Amount	
367 Charmel Pl	N/A	10	03	17	80.00	
City	State / Zip Code	Form (Cash, Check, etc)				
Columbus	OH 43235	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 $ 10,480.00