31-E R.C. 3517.10(B)

FOR PAPER FILING ONL Yent Date 7/18/13 Statement of Contributions Received

at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Full Name of Contributors of \$25 or Less Fund Raising Event Birch Tavern Registration Number, if PAC	Name of Committee in Full Citizens to Re-Ele	ect Edward Dildine					
Size Address Employer/Occupation/Labor Organization* M	Full Name of Contributor		ent Birch Taveri	<u> </u>	Registra	tion Number, if	PAC
Groveport OH 43125 ck/cash Fair Name of Contributor Street Address Employer/Occupation/Labor Organization* Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Full Name of Contributor Street Address Employer/Occupation/Labor Organization* Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Annount Annount Full Name of Contributor Full Name of Contributor Street Address Employer/Occupation/Labor Organization* M D Y Annount Full Name of Contributor F	Street Address 639 Main Street		Employer/Occupation/Labor Organization*		1 1	D 8 1 3	
Employer/Occupation/Labor Organization* M	City Groveport		· ·			-	
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OH	Street Address	:	Employer/Occup	ation/Labor Organization*	M	D Y	Amount
	City		ОН				

Fill in the boxes below only on the last page for this event.

\$770.00

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

in the date column					
Total contributions this event	Total expenditures this event.				

\$0.00

Page Total S \$770.00

^{*} 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)]