Event Date	09-15-2011
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## Statement of Contributions Received at a Social or Fundraising Event

	Prescribed by Secr	etary of State 3105			
Name of Committee in Full	" · · · · · · · · · · · · · · · · · · ·				
Citizens for Ronda S. Howard					
Full Name of Contributor			Registration Number, if PAC		
Janet R Day					
Street Address	Employer/Occupa	tion/Labor Organization*	M D Y Amount		
638 Beechwood Rd.			0 9 1 5 1 1	30.00	
City	State	Zip Code	Form(Cash, Check, etc)		
Whitehall	ОН	43213	Check 🤼		
Full Name of Contributor			Registration Number, it PAC		
Mary Mouzon					
Street Address	Employer/Occupa	tion/Labor Organization*	M D Y Amount		
689 Bernhard Rd.			0 9 1 5 1 1	50.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Whitehall	O   H	43213	Check Check		
Full Name of Contributor			Registration Number, if PAC		
Van Gregg Committee to Elect					
Street Address	Employer/Occupa	tion/Labor Organization*	M D Y Amount		
5182 Doral Ave			0 9 1 5 1 1	50.00	
City	State	Zip Code	Form(Cash, Check, etc)		
Whitehall	O   H	43213	Check		
Full Name of Contributor			Registration Number, if PAC		
Helen S Cook					
Street Address	Employer/Occupa	tion/Labor Organization*	M D Y Amount		
1265 Haddon Rd			0 9 1 5 1 1	50.00	
Eity	State	Zip Code	Form(Cash, Check, etc)		
Columbus	O   H	43209	Check		
Full Name of Contributor			Registration Number, if PAC		
Karen Conison					
Street Address	Employer/Occupat	tion/Labor Organization*	M D Y Amount		
958 Karl St			0 9 1 5 1 1	50.00	
City	State	Zip Code	Form(Cash, Check, etc)		
Whiteha <u>ll</u>	O   H	43213	Cash		
Full Name of Contributor			Registration Number, if PAC		
Charles D Underwood					
Street Address	Employer/Occupa	tion/Labor Organization*	M D Y Amount		
731 Fairway Blvd			0 9 1 5 1 1	100.00	
City	State	Zip Code	Form(Cash, Check, etc)		
Whitehall	O I H	43213	Check		
Full Name of Contributor			Registration Number, if PAC		
Mary Jeanetter Underwood					
Street Address	Employer/Occupa	tion/Labor Organization*	M D Y Amount	1	
731 Fairway Blvd			0 9 1 5 1 1	100.00	
City Whitehall	State	Zip Code	Form(Cash,Check,etc)		
	$\cap$	43213	Check	^	

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.

Page Tot	1\$430.00

<sup>\*</sup> 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)]