

FOR PAPER FILING ONLY

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Event Date 09-08-2013
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Name of Committee in Full		Registration Number, if PAC	
Citizens For Kim Maggard			
Full Name of Contributor Katie Ouneel		Registration Number, if PAC	
Street Address 3759 Washburn	Employer/Occupation/Labor Organization* Whitehall City Schools	M 09	D 08
City Whitehall	State OH	Y 13	Amount 150.00
Zip Code 43213		Form (Cash, <u>Check</u> , etc.)	
Full Name of Contributor Jessica Woodruff		Registration Number, if PAC	
Street Address 7035 Wearnful Dr	Employer/Occupation/Labor Organization* Southwest Schools	M 09	D 08
City Canal Winchester	State OH	Y 13	Amount 50.00
Zip Code 43110		Form (Cash, <u>Check</u> , etc.)	
Full Name of Contributor Teresa Netotien		Registration Number, if PAC	
Street Address 4242 Etna	Employer/Occupation/Labor Organization* City of Whitehall	M 09	D 08
City Whitehall	State OH	Y 13	Amount 75.00
Zip Code 43213		Form (Cash, <u>Check</u> , etc.)	
Full Name of Contributor John Fethens		Registration Number, if PAC	
Street Address 4714 Harbinger Circle E	Employer/Occupation/Labor Organization* City of Columbus	M 09	D 08
City Whitehall	State OH	Y 13	Amount 50.00
Zip Code 43213		Form (Cash, <u>Check</u> , etc.)	
Full Name of Contributor Janice Ritchey		Registration Number, if PAC	
Street Address 487 Elaine Rd	Employer/Occupation/Labor Organization*	M 09	D 08
City Columbus	State OH	Y 13	Amount 25.00
Zip Code 43213		Form (Cash, <u>Check</u> , etc.)	
Full Name of Contributor Walter Armes		Registration Number, if PAC	
Street Address 4010 Etna	Employer/Occupation/Labor Organization*	M 09	D 08
City Columbus	State OH	Y 13	Amount 50.00
Zip Code 43213		Form (Cash, <u>Check</u> , etc.)	
Full Name of Contributor Carl Stowell		Registration Number, if PAC	
Street Address 5120 Etna Rd	Employer/Occupation/Labor Organization* Retired	M 09	D 08
City Whitehall	State OH	Y 13	Amount 25.00
Zip Code 43213		Form (Cash, <u>Check</u> , etc.)	

* 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)]

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

\$ 425.00

Total expenditures this event

0.00

425.00
\$