

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Hawk</b>				
Full Name of Contributor <b>Daniel Fronk</b>			Registration Number, if PAC	
Street Address <b>1083 Lincoln Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>
City <b>Grandview</b>	State <b>OH</b>	Zip Code <b>43212</b>	Y <b>2</b>	Amount <b>\$165.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Andrew Ferris</b>			Registration Number, if PAC	
Street Address <b>3941 Fairlington Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43220</b>	Y <b>2</b>	Amount <b>\$125.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Gavin Blair</b>			Registration Number, if PAC	
Street Address <b>438 Grinnell St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>
City <b>Pickerington</b>	State <b>OH</b>	Zip Code <b>43147</b>	Y <b>2</b>	Amount <b>\$25.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Patricia Layman</b>			Registration Number, if PAC	
Street Address <b>3742 Mill Stream Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>	Y <b>5</b>	Amount <b>\$550.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Don Lee</b>			Registration Number, if PAC	
Street Address <b>4239 Demorest</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Grove City</b>	State <b>OH</b>	Zip Code <b>43123</b>	Y <b>5</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Cash</b>				
Full Name of Contributor <b>Sean Garvey</b>			Registration Number, if PAC	
Street Address <b>4270 W Ford Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Ashville</b>	State <b>OH</b>	Zip Code <b>43103</b>	Y <b>5</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Cash</b>				
Full Name of Contributor <b>Brett Cuthbert</b>			Registration Number, if PAC	
Street Address <b>183 Front St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Groveport</b>	State <b>OH</b>	Zip Code <b>43125</b>	Y <b>5</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Cash</b>				

\* 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

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Total expenditures this event.

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Page Total \$ **\$1,165.00**