31-E
R.C. 3517.10(B)

Event Date 10/05/16
Page 14

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	Employer/Occupation/Labor Organization*		Registration Number, if PAC		
Teresa M. Johnson					
Street Address	Employer/Occupation/Labor Organization*		M D Y		Amount
2742 Wildwood Rd	N/A		10 05 16		40.00
City	State	Zip Code	Form(Cash,Check,etc)		
Columbus	OH	43231	check		
Full Name of Contributor			Registration Number, if PAC		
Catherine M. Gordon					
Street Address	Employer/Occupation/Labor Organization*		M D Y		Amount
350 McCutcheon Rd	N/A		10 05 16		40.00
City	State	Zip Code	Form(Cash,Check,etc)		
Gahanna	OH	43230	check		
Full Name of Contributor			Registration Number, if PAC		
Christina M. Conrad					
Street Address	Employer/Occupation/Labor Organization*		M D Y		Amount
8604 Firstgate Dr	N/A		10 05 16		80.00
City	State	Zip Code	Form(Cash,Check,etc)		
Reynoldsburg	OH	43068	check		
Full Name of Contributor			Registration Number, if PAC		
Mary K Long					
Street Address	Employer/Occupation/Labor Organization*		M D Y		Amount
366 E Shelby Blvd	N/A		10 05 16		40.00
City	State	Zip Code	Form(Cash,Check,etc)		
Worthington	OH	43086	check		
Full Name of Contributor			Registration Number, if PAC		
Andrew J. Love					
Street Address	Employer/Occupation/Labor Organization*		M D Y		Amount
175 Mayfair Blvd	N/A		10 05 16		40.00
City	State	Zip Code	Form(Cash,Check,etc)		
Columbus	OH	43213	check		
Full Name of Contributor			Registration Number, if PAC		
Cynthia B. Moore					
Street Address	Employer/Occupation/Labor Organization*		M D Y		Amount
8186 Newark Ave	N/A		10 05 16		40.00
City	State	Zip Code	Form(Cash,Check,etc)		
Westerville	OH	43081	check		
Full Name of Contributor			Registration Number, if PAC		
Susan Kerr Gibson					
Street Address	Employer/Occupation/Labor Organization*		M D Y		Amount
1974 Wyandotte Rd.	N/A		10 05 16		40.00
City	State	Zip Code	Form(Cash,Check,etc)		
Columbus	OH	43212	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 $ 320.00