31-E
R.C. 3517.10(B)

Event Date 08-17-05
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full							
CITIZENS FOR RANKIN							
Full Name of Contributor						**Registration Number, if PAC**	
CHUCK DUTTON							
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**
7099 GAY ROAD				08	18	05	25.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**			
GROVE CITY	OH	43123		CASH			
Full Name of Contributor						**Registration Number, if PAC**	
DAN AMES							
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**
5691 GREAT HALL CT.				08	18	05	50.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**			
COLUMBUS	OH	43231		CASH			
Full Name of Contributor						**Registration Number, if PAC**	
STEPHEN P. SAMUELS							
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**
250 WEST STREET	SCHOTTENSTEIN ZOX & DU			08	18	05	225.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**			
COLUMBUS	OH	43215		CHECK			
Full Name of Contributor						**Registration Number, if PAC**	
KAREN A. WINTERS							
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**
2340 OXFORD ROAD				08	18	05	75.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**			
COLUMBUS	OH	43221		CHECK			
Full Name of Contributor						**Registration Number, if PAC**	
MARIA L. MONE							
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**
2505 WESTMONT BLVD.				08	18	05	25.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**			
COLUMBUS	OH	43221		CHECK			
Full Name of Contributor						**Registration Number, if PAC**	
SUZANNA D. GUSSLER							
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**
3893 CRISWELL DR.				08	18	05	25.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**			
UPPER ARLINGTON	OH	43220		CHECK			
Full Name of Contributor						**Registration Number, if PAC**	
JAMES P. JOYCE							
Street Address	**Employer/Occupation/Labor Organization***			**M**	**D**	**Y**	**Amount**
1335 DUBLIN ROAD SUITE 100B	HR GRAY & ASSOCIATES			08	18	05	500.00
City	**State**	**Zip Code**		**Form(Cash,Check,etc)**			
COLUMBUS	OH	43215		CHECK			

* Required for contributions from individuals over $100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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: 1,575.00

Total expenditures this event: 0.00

Page Total $ 925.00