Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date 8/24/11	
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Name of Committee in Full		
Citizens for Hawk		
Full Name of Contributor		Registration Number, if PAC
Pat Grabill	i	
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
2970 Arbuckle Rd		1 0 0 3 1 1 \$75.00
City	Sta te Zip Code	Form (Cash, Check, etc.)
London	OH 43,140	Check
Full Name of Contributor		Registration Number, if PAC
Central Ohio Realtors PAC		CP401
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
2700 Airport Dr		1 0 0 3 1 1 \$1,200.00
City	State Zip Code	Form (Cash, Check, etc.)
Columbus	OH 43219	Check
Full Name of Contributor		Registration Number, if PAC
Dan LeVesque		W N V I
Street Address 4179 Ashgrove Dr	Employer/Occupation/Labor Organization*	M D Y Amount 1 0 0 4 1 1 \$500.00
	Cto to Tin Code	Form (Cash, Check, etc.)
City Grove City	State Zip Code OH 43,123	Check
Full Name of Contributor	1 011 40,123	Registration Number, if PAC
James Stevenson	}	Registation (Market), William
Street Address	Employer/Occupation/Labor Organization*	M. D. Y. Amount
7107 Asheville Park Dr	Employer/Occupanon/Lacor Organization	1 0 0 4 1 1 \$500.00
Dity	State Zip Code	Form (Cash, Check, etc.)
Columbus	OH 43235	Check
Full Name of Contributor		Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
City	State Zip Code OH	Form (Cash, Check, etc.)
Full Name of Contributor		Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
City	State Zip Code OH	Form (Cash, Check, etc.)
Full Name of Contributor		Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
City	Stalte Zip Code	Form (Cash, Check, etc.)
	OH	

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

\$4,615.00

Total expenditures this event.

\$0.00

\$2,275.00 Page Total \$

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)]