Event Date // / 2 / 2 0/3 Page / es 2

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

Prescribed by Secretary of State 03/05

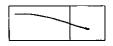
Name of Committee in Full CITIZENS Ger Leyte				
Full Name of Contributor Uike Curtin Street Address Employer/Occupation Labor Occupation			Registration Number, if PAC	
Street Address 1370 Cambridge Blvd City	Employer/Occupation/Labor Organization*		M / D 2 / 3	250.00
Marble ChSC	O#	Zip Code 43212	Form (Cash, Check, etc.)	y fix New New
Full Name of Contributor Evik F. Y955-eno SF Street Address	Registration Number, if PA	С		
Street Address 1990 Hampshire Read City	Employer/Occupation/Labor Organization*		1/10/2/13	Amount 260.00
City Upper Avling Fers Full Name of Contributor	Sta te	Zip Code 43221	Form (Cash, Check, etc.)	
Over Berning				
1105 Lincoln Road	Employer/Occupation/Labor Organization*		11/02/3	60.00
City Caradren Heights Full Name of Contributor	O IF	Zip Code 432/2	Form (Cash, Check, etc.)	,
Mile Allardya	Registration Number, if PA			
Street Address 1346 Lincoln Road City	Employer/Occupation/Labor Organization*		11/02/3	60.00
City Ciandrea Heyh/s Full Name of Contributor	OK OK	Zip Code 432/2	Form (Cash, Check, etc.)	
Fing Smith				
1747 W. 151 Svenue	Employer/Occupation/Labor Organization*		110213	7 <i>5.00</i>
City Ceard very Hey 4 to Full Name of Contributor	Olf Olf	Zip Code 43212	Form (Cash, Check, etc.)	
Shewe Von Jasinski			Registration Number, if PA	
Street Address 1260 Broodvien Avenue	Employer/Occupation/Labor Organization*		11/02/3	40.00
Grandview Heyht	Sta te	Zip Code 432/2	Form (Cash, Check, etc.)	
David Sichke			Registration Number, if PA	
David Sichko Street Address 1389 Cambridge Boxlevard City Marth Cliss	Employer/Occupation/Labor Organization*		1/02/3	45.00
March Clist	Sta te	2ip Code 432/2	Form (Cash, Chrck, etc.)	

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 \$ 770.00

^{*} 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)]