

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

Prescribed by Secretary of State 8/95

Name of Committee in Full <i>Citizens Committee for Persons with Mental Retardation</i>					
Full Name of Contributor <i>Jeannings Fund Raiser / Semi Coordination</i>				Registration number, if PAC	
Street Address <i>E. Broad Street</i>		Employer/Occupation/Labor Organization*		M	D
City <i>Columbus</i>		State <i>OH</i>	Zip Code <i>43215</i>	Y	Amount <i>425.00</i>
				Form (Cash, Check, etc.) <i>Checks</i>	
Full Name of Contributor <i>Yoga Fund Raiser</i>				Registration number, if PAC	
Street Address <i>Johnston Road</i>		Employer/Occupation/Labor Organization*		M	D
City <i>Columbus</i>		State <i>OH</i>	Zip Code <i>43219</i>	Y	Amount <i>40.00</i>
				Form (Cash, Check, etc.) <i>Checks</i>	
Full Name of Contributor <i>ARC Central Fundraisers</i>				Registration number, if PAC	
Street Address <i>Marilyn Lane</i>		Employer/Occupation/Labor Organization*		M	D
City <i>Cbs,</i>		State <i>OH</i>	Zip Code <i>43219</i>	Y	Amount <i>1425.00</i>
				Form (Cash, Check, etc.) <i>Cash/Checks</i>	
Full Name of Contributor <i>Community Service Awards (VOLT Registration / Table)</i>				Registration number, if PAC	
Street Address <i>Johnston Rd.</i>		Employer/Occupation/Labor Organization*		M	D
City <i>Cbs,</i>		State <i>OH</i>	Zip Code <i>43219</i>	Y	Amount <i>350.00</i>
				Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>ARC Ind. East Fund Raisers / Open House</i>				Registration number, if PAC	
Street Address <i>Taylor Station Road</i>		Employer/Occupation/Labor Organization*		M	D
City <i>Cbs,</i>		State <i>OH</i>	Zip Code <i>43210</i>	Y	Amount <i>1452.00</i>
				Form (Cash, Check, etc.) <i>Cash/Checks</i>	
Full Name of Contributor <i>Service Leadership Fund Raisers</i>				Registration number, if PAC	
Street Address <i>E. Broad St.</i>		Employer/Occupation/Labor Organization*		M	D
City <i>Cbs,</i>		State <i>OH</i>	Zip Code <i>43215</i>	Y	Amount <i>150.00</i>
				Form (Cash, Check, etc.) <i>Check</i>	

* Required for contributions 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 donate 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 net amount for this event to form No. 31-A. Under Full Name of Contributor state "Net contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event		minus	Total expenditures this event		=	Net Amount	
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Page Total \$ 3842