

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

Prescribed by Secretary of State 03/05

Event Date 9/22/11

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Name of Committee in Full Citizens For Chris Rodriguez						
Full Name of Contributor Carol Corcoran			Registration Number, if PAC			
Street Address 3985 Virginia Circle East	Employer/Occupation/Labor Organization* Retired		M 0	D 9	Y 2 2 1 1	Amount \$25.00
City Whitehall	State OH	Zip Code 43213	Form (Cash, Check, etc.) check			
Full Name of Contributor James R. Graham			Registration Number, if PAC			
Street Address 644 Greenwood Rd	Employer/Occupation/Labor Organization* Retired		M 0	D 9	Y 2 2 1 1	Amount \$25.00
City Whitehall	State OH	Zip Code 43213	Form (Cash, Check, etc.) Check			
Full Name of Contributor Ray Jones			Registration Number, if PAC			
Street Address 943 N. Nelson Rd	Employer/Occupation/Labor Organization* Self Employed		M 0	D 9	Y 2 2 1 1	Amount \$25.00
City Columbus	State OH	Zip Code 43219	Form (Cash, Check, etc.) Check			
Full Name of Contributor Jennifer Lupiba			Registration Number, if PAC			
Street Address 1418 Virgina Ave	Employer/Occupation/Labor Organization* Marketing Manager		M 0	D 9	Y 2 2 1 1	Amount \$51.00
City Columbus	State OH	Zip Code 43212	Form (Cash, Check, etc.) Check			
Full Name of Contributor Cheyenne Myers			Registration Number, if PAC			
Street Address 12500 Tollgate Rd	Employer/Occupation/Labor Organization* Global Construction/Estimate		M 0	D 9	Y 2 2 1 1	Amount \$70.00
City Pickerington	State OH	Zip Code 43147	Form (Cash, Check, etc.) Check			
Full Name of Contributor Rachel Schafer			Registration Number, if PAC			
Street Address 7452 Tyler Henry Ct	Employer/Occupation/Labor Organization* Nationwide Ins/Agent Rel		M 0	D 9	Y 2 2 1 1	Amount \$75.00
City Canal Winchester	State OH	Zip Code 43110	Form (Cash, Check, etc.) Check			
Full Name of Contributor Brent L Howard			Registration Number, if PAC			
Street Address 348 Cumberland Dr	Employer/Occupation/Labor Organization* Wallace Ackley/CFO		M 0	D 9	Y 2 2 1 1	Amount \$202.00
City Whitehall	State OH	Zip Code 43213	Form (Cash, Check, etc.) 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 also 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

\$613.00

Total expenditures this event.

\$47.00

Page Total \$ **\$473.00**