Event I	Date 8/22/10
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Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full			· · ·
Citizens for Kim Maggard			
Full Name of Contributor	Registration Number, if PAC		
Brent and Ronda Howard			
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount
348 Cumberland Drive	Wallce F Ackley		0 8 2 2 1 0 \$153.00
City	Sta te Zip Code		Form (Cash, Check, etc.)
Whitehall	OH 43213	3.	Check
Full Name of Contributor			Registration Number, if PAC
Joy Bivens			M D Y Amount
Street Address	Employer/Occupation/Labor C Ambassador Home	rganization* Health	0 8 2 2 1 0 \$53.00
4985 Doral Ave			Form (Cash, Check, etc.)
City Whitehall	Stal te Zip Code OH 4321:		Check
Full Name of Contributor	011 4321		Registration Number, if PAC
Charles Underwood			
Street Address	Employer/Occupation/Labor C	reanization*	M D Y Amount
731 Fairway Blvd	Whitehall City		0 8 2 2 1 0 \$106.00
City	Sta te Zip Code		Form (Cash, Check, etc.)
Whitehall	OH 4321	3	Check
Full Name of Contributor			Registration Number, if PAC
Dan Miller			
Street Address	Employer/Occupation/Labor C	Organization*	M D Y Amount
4124 Mayflower Blvd	USPS		0 8 2 2 1 0 \$100.00
City	State Zip Code		Form (Cash, Check, etc.)
Whitehall	OH 4321	3	Check
Full Name of Contributor Mike Brown			Registration Number, if PAC
Street Address	Employer/Occupation/Labor C	Organization*	M D Y Amount
5065 Greenwood Ct.	retired		0 8 2 2 1 0 \$53.00
City	State Zip Code		Form (Cash, Check, etc.) Check
Whitehall	OH 43213	<u>.</u>	
Full Name of Contributor Phil Allen			Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount \$53.00
371 Cumberland	City of Whiteh	all	0 8 2 2 1 0 \$53.00
City	Sta' te Zip Code		Form (Cash, Check, etc.) Check
Whitehall	OH 43213	<u> </u>	
Full Name of Contributor Karen Conison		-	Registration Number, if PAC
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount
958 Karl Street	Capital Univer		0 8 2 2 1 0 \$53.00
City	Sta'te Zip Code		Form (Cash, Check, etc.)
Whitehall	OH 4321	•	Check

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 t	his event
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\$977.00

Total expenditures this event.

\$0.00

Page Total \$ \$571.00

^{*} 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)]