

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

Prescribed by Secretary of State 8/95

Name of Committee in Full <u>Citizens Committee for Persons with Mental Retardation</u>			
Full Name of Contributor <u>Yoga Fundraiser</u>		Registration number, if PAC	
Street Address <u>Johnston Road</u>	Employer/Occupation/Labor Organization*	M   D   Y <u>12   19   07</u>	Amount <u>925.00</u>
City <u>Columbus</u>	State <u>OH</u> Zip Code <u>43219</u>	Form (Cash, Check, etc.) <u>Cash/Checks</u>	
Full Name of Contributor <u>ARC Central Fundraisers</u>		Registration number, if PAC	
Street Address <u>Manly Lane</u>	Employer/Occupation/Labor Organization*	M   D   Y <u>12   19   07</u>	Amount <u>2884.11</u>
City <u>Columbus</u>	State <u>OH</u> Zip Code <u>43219</u>	Form (Cash, Check, etc.) <u>Cash/Checks</u>	
Full Name of Contributor		Registration number, if PAC	
Street Address	Employer/Occupation/Labor Organization*	M   D   Y	Amount
City	State Zip Code	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	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	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	Form (Cash, Check, etc.)	

\* 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 <sup>for</sup> this event	Total expenditures this event	Net Amount
78,244 78	27970 -	50,274 78

Page Total \$ 3809.11