

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

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens To Retain Hood					
Full Name of Contributor Joseph Durham				Registration Number, if PAC	
Street Address 612 E. Dominion Blvd.		Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus		State OH	Zip Code 43214	Y 1	Amount \$150.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor Rene Rimelspach				Registration Number, if PAC	
Street Address 4959 Berry Leaf Pl.		Employer/Occupation/Labor Organization*		M 0	D 4
City Hilliard		State OH	Zip Code 43028	Y 1	Amount \$50.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor Tobie Sanders				Registration Number, if PAC	
Street Address 7471 Rodebaugh Rd.		Employer/Occupation/Labor Organization*		M 0	D 4
City Reynoldsburg		State OH	Zip Code 43068	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor Jeremy Dodgion				Registration Number, if PAC	
Street Address 1188 South High St.		Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus		State OH	Zip Code 43206	Y 1	Amount \$200.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor Douglas Funkhouser				Registration Number, if PAC	
Street Address 1560 Vanelm St.		Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus		State OH	Zip Code 43228	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor Joshua Hall				Registration Number, if PAC	
Street Address 29461 Cottrell Rd.		Employer/Occupation/Labor Organization*		M 0	D 4
City Frazeyburg		State OH	Zip Code 43822	Y 1	Amount \$50.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor Holly Hollandsworth				Registration Number, if PAC	
Street Address 1403 Meadow Road		Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus		State OH	Zip Code 43212	Y 1	Amount \$50.00
				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

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ 700.00