

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Citizens for Brian Larick</u>				Registration Number, if PAC	
Full Name of Contributor <u>Barry Fromm</u>				Registration Number, if PAC	
Street Address <u>2460 Stonehaven CT N</u>	Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>9</u>	Y <u>25</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43220</u>	Amount <u>100.00</u>		
Form (Cash, Check, etc.) <u>check</u>					
Full Name of Contributor <u>Ralph Griffith</u>				Registration Number, if PAC	
Street Address <u>2715 York Rd.</u>	Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>9</u>	Y <u>25</u>
City <u>Upper Arlington</u>	State <u>OH</u>	Zip Code <u>43221</u>	Amount <u>100.00</u>		
Form (Cash, Check, etc.) <u>check</u>					
Full Name of Contributor <u>Tom Weber</u>				Registration Number, if PAC	
Street Address <u>444 Tresham CT</u>	Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>9</u>	Y <u>25</u>
City <u>Gahanna</u>	State <u>OH</u>	Zip Code <u>43230</u>	Amount <u>50.00</u>		
Form (Cash, Check, etc.) <u>check</u>					
Full Name of Contributor <u>Rhesa Green</u>				Registration Number, if PAC	
Street Address <u>1084 cloverly Dr.</u>	Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>9</u>	Y <u>25</u>
City <u>Gahanna</u>	State <u>OH</u>	Zip Code <u>43230</u>	Amount <u>75.00</u>		
Form (Cash, Check, etc.) <u>cash</u>					
Full Name of Contributor <u>Jeff Mackey</u>				Registration Number, if PAC	
Street Address <u>924 Thayer Dr</u>	Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>9</u>	Y <u>25</u>
City <u>Gahanna</u>	State <u>OH</u>	Zip Code <u>43230</u>	Amount <u>50.00</u>		
Form (Cash, Check, etc.) <u>check</u>					
Full Name of Contributor				Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M	D	Y
City	State	Zip Code	Amount		
Form (Cash, Check, etc.)					
Full Name of Contributor				Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M	D	Y
City	State	Zip Code	Amount		
Form (Cash, Check, etc.)					

\* 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

375.00

Total expenditures this event.

Page Total \$

375.00