31-E
R.C. 3517.10(B)

Event Date 09/30/14
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full: Citizens Committee for Persons with DD

Full Name of Contributor	Street Address	City	State	Zip Code	Employer/Occupation/Labor Organization*	Registration Number, if PAC	M	D	Y	Amount	Form (Cash, Check, etc)
Mary L Martin	912 McMunn St	Pickerington	OH	43147-8197	N/A		09	30	14	40.00	check
David L Harvey	535 Beckler Ln	Delaware	OH	43015-3464	N/A		09	30	14	40.00	check
Michele Brosius	2481 Sherwood Rd	Columbus	OH	43209	N/A		09	30	14	40.00	check
Sarah J Gillian	2951 Splitrock Rd	Columbus	OH	43221	N/A		09	30	14	80.00	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 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: 53,320.00

Total expenditures this event: 11,385.18

Page Total $ 200.00