

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Hawk</b>					
Full Name of Contributor <b>Amanda Datemasch</b>				Registration Number, if PAC	
Street Address <b>2033 Harwitch Rd</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43221</b>	Y <b>1</b>	Amount <b>\$45.00</b>
Form (Cash, Check, etc.) <b>EFT</b>					
Full Name of Contributor <b>Dennis Copp</b>				Registration Number, if PAC	
Street Address <b>3248 Benbrook Pond Dr</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Hilliard</b>		State <b>OH</b>	Zip Code <b>43026</b>	Y <b>2</b>	Amount <b>\$25.00</b>
Form (Cash, Check, etc.) <b>EFT</b>					
Full Name of Contributor <b>Jody McCague</b>				Registration Number, if PAC	
Street Address <b>5537 High Arbor Dr</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Galloway</b>		State <b>OH</b>	Zip Code <b>43119</b>	Y <b>3</b>	Amount <b>\$50.00</b>
Form (Cash, Check, etc.) <b>EFT</b>					
Full Name of Contributor <b>Linda Altomare</b>				Registration Number, if PAC	
Street Address <b>2625 Vi Lilly Circle</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Grove City</b>		State <b>OH</b>	Zip Code <b>43123</b>	Y <b>0</b>	Amount <b>\$250.00</b>
Form (Cash, Check, etc.) <b>EFT</b>					
Full Name of Contributor <b>Jack Moser</b>				Registration Number, if PAC	
Street Address <b>8240 Smoke Rd</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Pataskala</b>		State <b>OH</b>	Zip Code <b>43026</b>	Y <b>0</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>EFT</b>					
Full Name of Contributor <b>Joe Budde</b>				Registration Number, if PAC	
Street Address <b>7267 Macbeth Dr</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Dublin</b>		State <b>OH</b>	Zip Code <b>43016</b>	Y <b>0</b>	Amount <b>\$30.00</b>
Form (Cash, Check, etc.) <b>EFT</b>					
Full Name of Contributor <b>Debra King</b>				Registration Number, if PAC	
Street Address <b>5655 Hardwell Dr</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Hilliard</b>		State <b>OH</b>	Zip Code <b>43026</b>	Y <b>0</b>	Amount <b>\$15.00</b>
Form (Cash, Check, etc.) <b>EFT</b>					

\* 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

--	--

Total expenditures this event.

--	--

Page Total \$ **\$515.00**