0.03.05
9-21-05
29

Statement of Contributions Received at a Social or Fundraising Event

	Tresembed by seen	etary of State 02/01			
Name of Committee in Full CITIZENS ECR DANKING					
CITIZENS FOR RANKIN Full Name of Contributor			To		
GEORGE ISAAC			Registration N	umber, if PAC	
Street Address	Jr				
715 E. PERRY STREET	Employer/Occupation/Labor Organization*		M D	Y Amount	
715 E. PERKT STREET	ISAAC CORP.			3 0 5	100.00
BRYAN	State	Zip Code	Form(Cash,Ch		
Full Name of Contributor	O H 43506			CHECK Registration Number, if PAC	
	TEADU CODI	THE THIRD ATAMA	1 "	umber, if PAC	
VORYS SATER SEYMOUR AND PEAS Street Address			OH 109	1 , 1	
52 E. GAY STREET, PO BOX 1008	Employer/Occu	pation/Labor Organization*	1 1	Y Amount	000.00
City	State	Tin Code	0 9 2 3		800.00
COLUMBUS	1	Zip Code	Form(Cash,Ch		
Full Name of Contributor	OH	43215	CHE		
KINSLEY F. NYCE			Registration N	umber, if PAC	
Street Address	[F1/0		 		
550 E. WALNUT ST.	Employer/Occupation/Labor Organization*		M D	Y Amount	944 CN 1151 CN
City	Charles	T- 0 1:	1 0 0 2		50.00
COLUMBUS	State O H	Zip Code 43215	Form(Cash,Che		
Full Name of Contributor	10 H	43413	CHE		
RICHANNE M. ZYMKOSKI			Registration N	umber, if PAC	
Street Address	Employer/Occur	nation (Labor Organization t	M D	Y Amount	
2128 POPLAR ST.	Employer/Occupation/Labor Organization* FRANKLIN COUNTY MUNI				100.00
City	State	Zip Code	Form(Cash,Che		100.00
COLUMBUS	O H	43207	CHE		
Full Name of Contributor		4.5207	Registration N		
ROBERT D. HEAD			Registration	Jillioei, II PAC	
Street Address	Employer/Occupation/Labor Organization*		M D	Y Amount	
3280 RIVERSIDE DR. STE 20	Employer/Occupation/Labor Organization*		1007		75.00
City	State	Zip Code	Form(Cash,Che		75.00
COLUMBUS	OH	43215	CHEC		
Full Name of Contributor		***************************************	Registration N		
LORIE L. MCCAUGHAN			Registration W	Jiliber, II FAC	
Street Address	Employer/Occupation/Labor Organization*		MID	Y Amount	
5492 RED BANK ROAD	2	oution, Euser Organization	1 0 0 7		50.00
City	State	Zip Code	Form(Cash,Che		50.00
GALENA	$O \perp H$	43021	CHEC		
Full Name of Contributor		XC*C dus.L	Registration Nu		
MARK A. SERROTT			- Sociation No		
Street Address	Employer/Occur	pation/Labor Organization*	M D	Y Amount	
789 NORTHWEST BLVD.	1	and an addition	1 0 0 7	1	75.00
City	State	Zip Code	Form(Cash,Che		75.00
COLUMBUS	O H	43212	CHEC		
~ ~ W W LTAN		T./4.1.4	CITE	J.X.	

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 \$	1,250.00
2,250.00	0.00	L	

Required for contributions from individuals 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 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)]