31-E
R.C. 3517.10(B)

Event Date 10/7/15
Page 5

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				Registration Number, if PAC	
Patricia B. Aellig					
Street Address	Employer/Occupation/Labor Organization*			M D Y	Amount
5763 Bausch Rd	N/A			10 07 15	40.00
City	State	Zip Code		Form (Cash, Check, etc)	
Galloway	OH	43119		check	
Full Name of Contributor				Registration Number, if PAC	
Barbara E Michael Jones					
Street Address	Employer/Occupation/Labor Organization*			M D Y	Amount
1005 Chelsea Ave	N/A			10 07 15	50.00
City	State	Zip Code		Form (Cash, Check, etc)	
Bexley	OH	43209		check	
Full Name of Contributor				Registration Number, if PAC	
Anthony L Hartley					
Street Address	Employer/Occupation/Labor Organization*			M D Y	Amount
970 Boyne Ct	N/A			10 07 15	320.00
City	State	Zip Code		Form (Cash, Check, etc)	
Reynoldbsburg	OH	43068		check	
Full Name of Contributor				Registration Number, if PAC	
Shirley A Ticknor					
Street Address	Employer/Occupation/Labor Organization*			M D Y	Amount
3989 Orchard Lane	N/A			10 07 15	440.00
City	State	Zip Code		Form (Cash, Check, etc)	
Grove City	OH	43123		check	
Full Name of Contributor				Registration Number, if PAC	
Angela T. Ray					
Street Address	Employer/Occupation/Labor Organization*			M D Y	Amount
1124 Lori Lane	N/A			10 07 15	160.00
City	State	Zip Code		Form (Cash, Check, etc)	
Westerville	OH	43081		check	
Full Name of Contributor				Registration Number, if PAC	
Joyce E Barrowman					
Street Address	Employer/Occupation/Labor Organization*			M D Y	Amount
100 Aruba Ave	N/A			10 07 15	80.00
City	State	Zip Code		Form (Cash, Check, etc)	
Johnstown	OH	43031		check	
Full Name of Contributor				Registration Number, if PAC	
Karen A Widmayer					
Street Address	Employer/Occupation/Labor Organization*			M D Y	Amount
15733 London Rd	N/A			10 07 15	80.00
City	State	Zip Code		Form (Cash, Check, etc)	
Orient	OH	43146		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: 52,070.00

Total expenditures this event: 12,305.31

Page Total $ 1,170.00