Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date	10/25/05
Page 13	

N co in this								
Name of Committee in Full								
Citizens for Rankin			,					
Full Name of Contributor					Registration Number, if PAC			
Richard D. Topper								
Street Address	Emolover/Occupation/Labor Organization Atto Web Law office of Richard Topper,			D	Y	Amount		
1500 W. Third Ave., Suite 400				2 6	0 5	\$150.00		
City		Zip Code	Form (C	ash, Ch	eck, etc.)			
Columbus	OH	43215	Check	Check				
Full Name of Contributor				Registration Number, if PAC				
Columbus Franklin County AFL CIO PCE								
Street Address	Employer/Occupation/Labor Organization*			D	Y	Amount		
1545 Alum Creek Drive, 2nd Floor				2 6	0 5	\$200.00		
City	Starte	Zip Code	Form (C	ash, Ch	eck, etc.)			
Columbus	ОН	43209	Chec	k				
Full Name of Contributor			Registr	ation Nu	mber, if I	PAC		
Jeff Portman								
Street Address	Employer/Occupation	nn/Labor Organization*	Μį	D	Y	Amount		
471 E. Broad Street, Suite 1820	Employer/Occupation/Labor Organization* PortmanFoleyFlint, A けるこれを実			2 8	0 5	\$100.00		
City		Zip Code			eck, etc.)			
Columbus	ОН	43215	Chec	k				
Full Name of Contributor	1 011 302,0			Registration Number, if PAC				
John P. Gilligan								
Street Address	Employer Occupation	AA	. N	l Di	l Yl	Amount		
250 West Street	Employer/Occupation/Labor Organization Afformed SchottensteinZoxDunn,			واوا	0 5	\$125.00		
City	State	Zip Code	1 0	1 ! .	eck, etc.)			
Columbus	OH	43215	Chec		,			
Full Name of Contributor	011	40210			mber, if I	PAC		
John C. McDonald			_					
Street Address	Employer Companies I along Oppositors A Along			T D	l Yi	Amount		
250 West Street	Employer/Occupation/Labor Organization* A Howey SchottensteinZoxDunn,			2 8	0 5	\$125.00		
City	State	Zip Code	Form (C	!!! `ash Ch	eck, etc.)			
Columbus	OH	43215	Chec		,			
Full Name of Contributor	,		Registr	ation N	ımber, if l	PAC		
Jeffrey D. Porter			112612					
Street Address	In 1 10 11	an an annual Albertan	Λŧ	l bi	Ιvi	Amount		
329 S. Richardson Avenue	Employer/Occupation/Labor Organization* Attacher KeglerBrownHillRitter,		1 0	2 8	0 5	\$100.00		
0	1	Zip Code	Form (C		eck, etc.)			
Columbus	OH	43204	Check	(ccn, ctc.,			
	<u> </u>	<u> </u>	ļ		mber if I	PAC		
Full Name of Contributor Columbus Sheet Metal Workers Committee on Political Education				Registration Number, if PAC OH1053				
			M D Y Amount					
Street Address 3035 Lamb Avenue	Employer/Occupation/Labor Organization*		1 0	1	0 5	\$350.00		
			1 1	i	eck, etc.)			
Columbus	State	Zip Code 43219	Chec		eck, fic.)			
Columbus	OH	1 40219	Chiec	**				

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				
\$0.00				
1				

Total expenditures this event.

\$0.00

^{*} 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)]