31-A
R.C. 3517.10

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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full									
Citizens for Gordon									
Full Name of Contributor							Registration Number, if PAC		
Lucille Parrette									
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)	
3146 Pine Manor Blvd.								ck	
City	State	Zip Code	M	D	Y			Amount	
Grove City	OH	43123	10	24	11			20.00	
Full Name of Contributor							Registration Number, if PAC		
Carl L. Wiley									
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)	
2698 Wonderview Dr.								ck	
City	State	Zip Code	M	D	Y			Amount	
Grove City	OH	43123	10	24	11			20.00	
Full Name of Contributor							Registration Number, if PAC		
Donald Swanson									
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)	
4391 Clubs Trail Ln								ck	
City	State	Zip Code	M	D	Y			Amount	
Grove City	OH	43123	10	24	11			50.00	
Full Name of Contributor							Registration Number, if PAC		
Theodore G. Mixer									
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)	
3006 Shaw Dr.								ck	
City	State	Zip Code	M	D	Y			Amount	
Grove City	OH	43123	11	04	11			25.00	
Full Name of Contributor							Registration Number, if PAC		
Andrea J. Russell									
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)	
5300 Coneflower Dr								ck	
City	State	Zip Code	M	D	Y			Amount	
Grove City	OH	43123	11	04	11			30.00	
Full Name of Contributor							Registration Number, if PAC		
Gregory N. Grunch									
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)	
2560 Bryan Circle								ck	
City	State	Zip Code	M	D	Y			Amount	
Grove City	OH	43123	11	04	11			100.00	
Full Name of Contributor							Registration Number, if PAC		
Diane Hannon Forster									
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)	
4673 Claybourn Ct.								ck	
City	State	Zip Code	M	D	Y			Amount	
Grove City	OH	43123	11	04	11			50.00	
Full Name of Contributor							Registration Number, if PAC		
Timothy S. Eistone									
Street Address	Employer/Occupation/Labor Organization*							Form (Cash, Check, etc.)	
1062 Camargo Cir								ck	
City	State	Zip Code	M	D	Y			Amount	
Grove City	OH	43123	11	04	11			30.00	

* 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)]

Page Total $ 325.00