31-E R.C. 3517.10(B)

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

Event Date 8/10/11	
Page	

Name of Committee in Full			
Citizens for Hawk			
Full Name of Contributor	-		Registration Number, if PAC
Lynne Crow		·	
Street Address 2615 Marblevista Blvd	Employer/Occups	tion/Labor Organization*	0 8 2 3 1 1 Amount \$45.00
City Columbus	State OH	Zip Code 43204	Form (Cash, Check, etc.) Check
	J On	40204	Registration Number, if PAC
Full Name of Contributor  Michaellynn Evans			Registration Number, it IAC
Street Address	I 1 10	d a 1 to or object of	M D Y Amount
4903 Britton Farms Ct	Етрюует/Оссира	tion/Labor Organization*	0 8 2 3 1 1 \$100.00
City	Sta to	Zip Code	Form (Cash, Check, etc.)
Hilliard	OH	43026	Check
Full Name of Contributor  Anne Petit			Registration Number, if PAC
Street Address	Employer/Occup	ntion/Labor Organization*	M D Y Amount
161 Alton Rd			0 8 2 4 1 1 \$125.00
City	Sta¦te OH	Zîp Code 43119	Form (Cash, Check, etc.) Check
Galloway	Un	43   13	Registration Number, if PAC
Full Name of Contributor			(cg/salahon rumber, ii rice
Kathy Clark Street Address	F	i ation/Labor Organization*	M D Y Amount
4520 Carriage Hill Ln	Employer/Occup	ation/Labor Organization*	0 8 2 4 1 1 \$50.00
City	Sta' te	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43220	Check
Full Name of Contributor Sharon Reichard			Registration Number, if PAC
	<del></del>	1	Mi D Yi Amount
Street Address 2427 Marthas Wood	Employer/Occup	ation/Labor Organization*	0 8 2 4 1 1 \$100.00
City Grove City	Stal te OH	Zip Code 43123	Form (Cash, Check, etc.) Check
Full Name of Contributor Michele Shuster	. <u> </u>		Registration Number, if PAC
Street Address	E-malayar/Occup	l ation/Labor Organization*	M D Y Amount
7030 Dean Farm Rd	Employer/Occup	and the contraction	0  8  2  4  1  1   \$270.00
City New Albany	Sta`te OH	Zip Code 43054	Form (Cash, Check, etc.) Check
		1	Registration Number, if PAC
Full Name of Contributor Lily Gajtanouska			
Street Address	Employer/Occup	ation/Labor Organization*	M D Y Amount 0 8 2 4 1 1 \$45.00
3868 Etna St		Zin Code	Form (Cash, Check, etc.)
City Whitehall	Stal te OH	Zip Code 43213	Cash
* Proving for contributions from individuals over	N100 to statewide and General A	ssembly candidates. If contrib	outor is self-employed, the occupation and the name of
the individual's business, if any, rather than employ labor organization of which the employees are men	er should be listed. If two or mor	e employees contribute via p	ayroll deduction and exceed the aggregate of \$100, the
Fill in the boxes below only on the last page for this Transfer the Total contributions for this event to form in the date column	event. n No. 31-A. Under Full Name of	Contributor state "Contributi	ions from form No. 31-E" and list the date of the even
		Total avanditums this	event
Total contributions this event		Total expenditures this	- Crein.
,			
			Page Total \$ \$735.00
		<u> </u>	rage total s