

Event Date	<u>7/23/09</u>
Page	<u>9</u>

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for David DeCapua</b>							
Full Name of Contributor <b>Kristin Purcell</b>				Registration Number, if PAC			
Street Address <b>1768 Arlington Avenue</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>7</b>	<b>2</b>	<b>50.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43212</b>		Form(Cash,Check,etc) <b>check</b>	
Full Name of Contributor <b>Kurt Yoder</b>				Registration Number, if PAC			
Street Address <b>2075 Fairfax Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>7</b>	<b>2</b>	<b>100.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43221</b>		Form(Cash,Check,etc) <b>check</b>	
Full Name of Contributor <b>Stephanie Kincaid</b>				Registration Number, if PAC			
Street Address <b>2133 Sandover Court</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>7</b>	<b>2</b>	<b>50.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43220</b>		Form(Cash,Check,etc) <b>check</b>	
Full Name of Contributor <b>J. Michael Collister</b>				Registration Number, if PAC			
Street Address <b>2085 Elgin Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>7</b>	<b>2</b>	<b>50.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43221</b>		Form(Cash,Check,etc) <b>check</b>	
Full Name of Contributor <b>Katrina Ruscilli</b>				Registration Number, if PAC			
Street Address <b>2107 Ellington Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>7</b>	<b>2</b>	<b>150.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43221</b>		Form(Cash,Check,etc) <b>check</b>	
Full Name of Contributor <b>Jennifer Mason</b>				Registration Number, if PAC			
Street Address <b>1666 Essex Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>7</b>	<b>2</b>	<b>100.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43221</b>		Form(Cash,Check,etc) <b>check</b>	
Full Name of Contributor <b>Robert Heller</b>				Registration Number, if PAC			
Street Address <b>2129 Yorkshire Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>0</b>	<b>7</b>	<b>2</b>	<b>150.00</b>
City <b>Columbus</b>		State <b>O</b>	H <b>H</b>	Zip Code <b>43221</b>		Form(Cash,Check,etc) <b>check</b>	

\* 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

Total expenditures this event

Page Total \$ 650.00