Event Date	05/09/09
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05 Name of Committee in Full Citizens for Lori M. Tvack Full Name of Contributor Registration Number, if PAC Lance Thompson Street Address Employer/Occupation/Labor Organization* Amount 108 W. Royal Forest Blvd. Attorney, Dana Pariser Co 0 5 1 0 0 9 100.00 City Zip Code Form(Cash,Check,etc) Columbus Η 43214 Check Full Name of Contributor Registration Number, if PAC Gregory Schultz Street Address Employer/Occupation/Labor Organization* 672 1/2 North High St Organizing for America 0 5 0 9 0 9 150.00 Form(Cash,Check,etc) State Zip Code Columbus H 43201 Check Full Name of Contributor Registration Number, if PAC Gregory Finnerty Employer/Occupation/Labor Organization* D 21 West Broad Street, Ste 500 Attorney 0 | 4 | 2 | 3 | 0 | 9 100.00 Zip Code Form(Cash,Check,etc) Columbus Н 43215 Check Full Name of Contributor Registration Number, if PAC Mike Rankin Street Address Employer/Occupation/Labor Organization* 2432 Wyncourtney Ct. State Registrar, BMV 0 5 0 9 0 9 100.00 City State Zip Code Form(Cash,Check,etc) Powell 43065 Money Order Full Name of Contributor Registration Number, if PAC Edward Leonard Street Address Employer/Occupation/Labor Organization* Amount PO Box 1104 Franklin County Treasurer 0 5 0 9 0 9 50.00 State Zip Code Form(Cash,Check,etc) Columbus 43216 Check Registration Number, if PAC Donald Rowan Street Address Employer/Occupation/Labor Organization* D Amount 4174 Wright Park Retired 0 5 0 9 0 9 100.00 State Zip Code Form(Cash,Check,etc) Columbus, 43214 Check Full Name of Contributor Registration Number, if PAC Vorys, Sater, Seymour & Pease - John J. Kulewicz OH109 Street Address Employer/Occupation/Labor Organization* D 52 East Gay St Vorys, Sater 0 5 0 7 0 9 250.00 Zip Code Form(Cash,Check,etc) Columbus

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 No. 31-E" and list the date of the event in the date column.

Total contributions this event	Total expenditures this event	
4.525.00	694.60	Page Total \$850.00

43215

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)]