31-E
R.C. 3517.10(B)

Event Date 10/01/19
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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 Committee for Persons with DD					
Full Name of Contributor			Registration Number, if PAC		
Kelly M. Thompson					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
3049 Woodloop Lane			10 01 19	40.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Columbus	OH	43204	check		
Full Name of Contributor			Registration Number, if PAC		
Anne M. Tipton					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
2853 Calumet St	N/A		10 01 19	40.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Columbus	OH	43202	check		
Full Name of Contributor			Registration Number, if PAC		
Goodwill Columbus					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
1331 Edgehill Rd	N/A		10 01 19	10,000.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Columbus	OH	43212	check		
Full Name of Contributor			Registration Number, if PAC		
Maryalice Turner					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
16611 Truetown Road	N/A		10 01 19	40.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Millfield	OH	45761	check		
Full Name of Contributor			Registration Number, if PAC		
Lynn A. Watkins					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
904 Timberline Rd	N/A		10 01 19	40.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Columbus	OH	43212	check		
Full Name of Contributor			Registration Number, if PAC		
Dorothy V. Yeager					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
3374 Column Drive	N/A		10 01 19	80.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Columbus	OH	43221	check		
Full Name of Contributor			Registration Number, if PAC		
I Am Boundless, Inc.					
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount	
445 E Dublin Granville Rd	N/A		10 01 19	250.00	
City	State	Zip Code	Form(Cash,Check,etc)		
Worthington	OH	43085	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)]

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 $ 10,490.00