

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>CITIZENS FOR HAUGHN</b>				
Full Name of Contributor <b>WILLIAM P WEMLINGER</b>			Registration Number, if PAC	
Street Address <b>3191 COLUMBUS ST</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	Y <b>2</b>	Amount <b>\$25.00</b>
Full Name of Contributor <b>RON W GROSSMAN</b>			Registration Number, if PAC	
Street Address <b>3143 PARK ST</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	Y <b>2</b>	Amount <b>\$40.00</b>
Full Name of Contributor <b>JEAN A HAUGHN</b>			Registration Number, if PAC	
Street Address <b>2578 BRYAN CIRCLE</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>JODY E BURRIS</b>			Registration Number, if PAC	
Street Address <b>4375 SHIRLENE COURT</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>CATHY S VINCENT</b>			Registration Number, if PAC	
Street Address <b>1076 TAYLOR WOODS PL</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>
City <b>REYNOLDSBURG</b>	State <b>OH</b>	Zip Code <b>43068</b>	Y <b>2</b>	Amount <b>\$25.00</b>
Full Name of Contributor <b>SHELAH K STAGE</b>			Registration Number, if PAC	
Street Address <b>2733 WOODGROVE DR</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	Y <b>2</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>DAVID ROASA</b>			Registration Number, if PAC	
Street Address <b>2407 MARTHAS WOOD CT</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>
City <b>GROVE CITY</b>	State <b>OH</b>	Zip Code <b>43123</b>	Y <b>2</b>	Amount <b>\$100.00</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 also 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

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ 440.00