

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

Prescribed by Secretary of State 02/01

Name of Committee in Full <b>CITIZENS FOR RANKIN</b>					
Full Name of Contributor <b>JAMES V. MANIACE</b>				Registration Number, if PAC	
Street Address <b>155 W. MAIN ST., #605</b>		Employer/Occupation/Labor Organization* <b>CHESTER WILL COX &amp; Saxe</b>		M	D
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43215</b>	Y	Amount <b>100.00</b>
				Form (Cash, Check, etc) <b>CHECK</b>	
Full Name of Contributor <b>MICHAEL T. GUNNER</b>				Registration Number, if PAC	
Street Address <b>3535 FISHINGER ROAD, #220</b>		Employer/Occupation/Labor Organization*		M	D
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43215</b>	Y	Amount <b>50.00</b>
				Form (Cash, Check, etc) <b>CHECK</b>	
Full Name of Contributor <b>JANET GRUBB</b>				Registration Number, if PAC	
Street Address <b>4062 GEORGESVILLE RD.</b>		Employer/Occupation/Labor Organization*		M	D
City <b>GROVE CITY</b>		State <b>OH</b>	Zip Code <b>43123</b>	Y	Amount <b>50.00</b>
				Form (Cash, Check, etc) <b>CHECK</b>	
Full Name of Contributor <b>JAMES B. FEIBEL</b>				Registration Number, if PAC	
Street Address <b>88 E. BROAD ST., SUITE 900</b>		Employer/Occupation/Labor Organization* <b>ATTORNEY</b>		M	D
City <b>COLUMBUS</b>		State <b>OH</b>	Zip Code <b>43215</b>	Y	Amount <b>100.00</b>
				Form (Cash, Check, etc) <b>CHECK</b>	
Full Name of Contributor <b>PAMELA E. HYKES O'GRADY</b>				Registration Number, if PAC	
Street Address <b>3682 RIDGEWOOD DRIVE</b>		Employer/Occupation/Labor Organization*		M	D
City <b>HILLIARD</b>		State <b>OH</b>	Zip Code <b>43026</b>	Y	Amount <b>100.00</b>
				Form (Cash, Check, etc) <b>CHECK</b>	
Full Name of Contributor				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D
City		State	Zip Code	Y	Amount
				Form (Cash, Check, etc)	
Full Name of Contributor				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M	D
City		State	Zip Code	Y	Amount
				Form (Cash, Check, etc)	

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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

400.00

Total expenditures this event

0.00

Page Total \$ 400.00