Event Date	08-17-05
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

	ocnbca	J, JCC/	ctary or state 02701						
Name of Committee in Full CITIZENS FOR RANKIN									
Full Name of Contributor				IDi-t	- A N		DAG		
CHUCK DUTTON				Registra	Registration Number, if PAC				
Street Address	let	/0		М —		T v	T		
	Employe	Employer/Occupation/Labor Organization*			D	Y	Amount	a= 00	
7099 GAY ROAD	State Zip Code			0 8 1 8 0 5 25.00 Form(Cash,Check,etc)					
City CPOVE CITY			Zip Code						
GROVE CITY	0	H	43123		CASE				
Full Name of Contributor				Registra	ation Nu	mber, if	PAC		
DAN AMES				м					
Street Address	Employe	Employer/Occupation/Labor Organization*			D	Y	Amount		
5691 GREAT HALL CT.					1 8	0 5	1	50.00	
City	St	ate	Zip Code	Form(C	ash,Che	ck,etc)			
COLUMBUS	0	I-I	43231	1 '	CASE	L			
Full Name of Contributor				Registra	tion Nu	mber, if	PAC		
STEPHEN P. SAMUELS									
Street Address	Employe	r/Occu	pation/Labor Organization*	М	D	Y	Amount		
250 WEST STREET	SCF	SCHOTTENSTEIN ZOX & D		0 8	1 8	0 5		225.00	
City	Sta	ate	Zip Code	Form(Ca					
COLUMBUS		H	43215		HEC	K			
Full Name of Contributor				Registra	tion Nu	mber, if	PAC		
KAREN A. WINTERS				-					
Street Address	Employe	r/Occu	pation/Labor Organization*	М	D	Υ	Amount		
2340 OXFORD ROAD			,			0 5	4	75.00	
City	Sta	ite	Zip Code	Form(Ca				75.00	
COLUMBUS	0	Н	43221	1 '	THEC				
Full Name of Contributor			Ting f have done it.	Registra			DAC		
MARIA L. MONE				incgisti a	COII NUI	riber, ii i	rac		
Street Address	Employe	Employer/Occupation/Labor Organization*			D	ΙΥ	Amount		
2505 WESTMONT BLVD.	Linploye	Employer/ Occupation/ Labor Organization-		M		0 5		25.00	
City	Sta	rt o	Zip Code	Form(Ca				25.00	
COLUMBUS	0	Н	43221		HEC				
Full Name of Contributor	10	1.1	4.0221	Registra			04.6		
SUZANNA D. GUSSLER				Registra	tion nur	прет, и г	PAC		
Street Address	Emandayea	×/000	notion (Lohor Oversitant	М		1 1/			
3893 CRISWELL DR.	Employe	Employer/Occupation/Labor Organization*			D 1 0	Υ	Amount	a= 00	
City			Tax A. I	0 8				25.00	
UPPER ARLINGTON	Sta		Zip Code	Form(Ca					
	0	H	43220		HEC				
Full Name of Contributor				Registra	tion Nur	nber, if I	PAC		
JAMES P. JOYCE			7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	М					
Street Address		Employer/Occupation/Labor Organization*			D	Υ	Amount		
1335 DUBLIN ROAD SUITE 100B		HR GRAY & ASSOCIATES			1 8	1		500.00	
City	Sta		Zip Code	Form(Ca					
COLUMBUS	0	H	43215	\Box	HEC	K			
* Required for contributions from individuals over \$100 to st	atewide and ge	neral as	ssembly candidates. If contrib	utor is se	lf-emnlo	ved occ	unation rathe	r than employer	

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			
1,575.00	0.00	Page Total \$	925.00

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation rather than employe 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)]