

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

Prescribed by Secretary of State 3/05

|                                                               |                                                                            |                          |                                      |                             |                         |
|---------------------------------------------------------------|----------------------------------------------------------------------------|--------------------------|--------------------------------------|-----------------------------|-------------------------|
| Name of Committee in Full<br><b>Citizens for Ron Grossman</b> |                                                                            |                          |                                      |                             |                         |
| Full Name of Contributor<br><b>Joyce m Janczak</b>            |                                                                            |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>1221 London-Groveport Road</b>           | Employer/Occupation/Labor Organization*                                    |                          | M<br><b>0</b>                        | D<br><b>9</b>               | Y<br><b>2011</b>        |
| City<br><b>Grove City</b>                                     | State<br><b>OH</b>                                                         | Zip Code<br><b>43123</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>200.00</b> |
| Full Name of Contributor<br><b>Trudy A Funk</b>               |                                                                            |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>1283 White Road</b>                      | Employer/Occupation/Labor Organization*                                    |                          | M<br><b>0</b>                        | D<br><b>9</b>               | Y<br><b>2011</b>        |
| City<br><b>Grove City</b>                                     | State<br><b>OH</b>                                                         | Zip Code<br><b>43123</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>100.00</b> |
| Full Name of Contributor<br><b>Cynthia A Corbin</b>           |                                                                            |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>2485 Milligan Grove</b>                  | Employer/Occupation/Labor Organization*                                    |                          | M<br><b>0</b>                        | D<br><b>9</b>               | Y<br><b>2011</b>        |
| City<br><b>Grove City</b>                                     | State<br><b>OH</b>                                                         | Zip Code<br><b>43123</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</b>  |
| Full Name of Contributor<br><b>Orlando A Alonso</b>           |                                                                            |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>6671 Darby Road</b>                      | Employer/Occupation/Labor Organization*                                    |                          | M<br><b>0</b>                        | D<br><b>9</b>               | Y<br><b>2011</b>        |
| City<br><b>Circleville</b>                                    | State<br><b>OH</b>                                                         | Zip Code<br><b>43113</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</b>  |
| Full Name of Contributor<br><b>Julie L Oyster</b>             |                                                                            |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>5985 Grant Run Pl</b>                    | Employer/Occupation/Labor Organization*                                    |                          | M<br><b>0</b>                        | D<br><b>9</b>               | Y<br><b>2011</b>        |
| City<br><b>Grove City</b>                                     | State<br><b>OH</b>                                                         | Zip Code<br><b>43123</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>100.00</b> |
| Full Name of Contributor<br><b>Dean Kiourtsis</b>             |                                                                            |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>4024 Glenda Plance</b>                   | Employer/Occupation/Labor Organization*                                    |                          | M<br><b>0</b>                        | D<br><b>9</b>               | Y<br><b>2011</b>        |
| City<br><b>Columbus</b>                                       | State<br><b>OH</b>                                                         | Zip Code<br><b>43220</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</b>  |
| Full Name of Contributor<br><b>Dean Ringle</b>                |                                                                            |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>865 Macon Alley</b>                      | Employer/Occupation/Labor Organization*<br><b>Dean Ringle for Engineer</b> |                          | M<br><b>0</b>                        | D<br><b>9</b>               | Y<br><b>2011</b>        |
| City<br><b>Columbus</b>                                       | State<br><b>OH</b>                                                         | Zip Code<br><b>43206</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><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 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 \$ 650.00