

# 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 Hawk</b>				
Full Name of Contributor <b>Linda Stickney</b>			Registration Number, if PAC	
Street Address <b>1730 Arlington Ave</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43212</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Stephen Wainfor</b>			Registration Number, if PAC	
Street Address <b>3960 Kioka Ave</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43220</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Patricia Baker</b>			Registration Number, if PAC	
Street Address <b>5752 Ennishannon Pl</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43016</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Joel Rhoades</b>			Registration Number, if PAC	
Street Address <b>5975 S Section Line Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Delaware</b>	State <b>OH</b>	Zip Code <b>43015</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>S Mullenix</b>			Registration Number, if PAC	
Street Address <b>2824 Eastcleft Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Robert Case</b>			Registration Number, if PAC	
Street Address <b>4286 Evansdale Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43214</b>	Y <b>1</b>	Amount <b>\$250.00</b>
Form (Cash, Check, etc.) <b>Check</b>				
Full Name of Contributor <b>Jane Jones</b>			Registration Number, if PAC	
Street Address <b>1988 Edgemont Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43212</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Form (Cash, Check, etc.) <b>Check</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

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Total expenditures this event.

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Page Total \$ **\$650.00**