

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

| | | | | | |
|---|---|--------------------------|--------------------------------------|-----------------------------|------------------------|
| Name of Committee in Full Citizens for Chris Long | | | | | |
| Full Name of Contributor Teresa Manack | | | | Registration Number, if PAC | |
| Street Address 8264 Crete Lane | Employer/Occupation/Labor Organization* | | M 1 | D 0 | Y 3 |
| City Blacklick | State OH | Zip Code 43004 | Form(Cash,Check,etc) Check | | Amount 20.00 |
| Full Name of Contributor Christopher Weil | | | | Registration Number, if PAC | |
| Street Address 632 Brighton Lane | Employer/Occupation/Labor Organization* | | M 1 | D 0 | Y 3 |
| City Pickerington | State OH | Zip Code 43147 | Form(Cash,Check,etc) Check | | Amount 40.00 |
| Full Name of Contributor Angela Cornelius | | | | Registration Number, if PAC | |
| Street Address 796 Sunview Road | Employer/Occupation/Labor Organization* | | M 1 | D 0 | Y 3 |
| City Reynoldsburg | State OH | Zip Code 43068 | Form(Cash,Check,etc) Check | | Amount 25.00 |
| Full Name of Contributor Lucinda Balach | | | | Registration Number, if PAC | |
| Street Address 8109 Priestley Drive | Employer/Occupation/Labor Organization* | | M 1 | D 0 | Y 3 |
| City Reynoldsburg | State OH | Zip Code 43068 | Form(Cash,Check,etc) Check | | Amount 50.00 |
| Full Name of Contributor | | | | Registration Number, if PAC | |
| Street Address | Employer/Occupation/Labor Organization* | | M | D | Y |
| City | State | Zip Code | Form(Cash,Check,etc) | | Amount |
| Full Name of Contributor | | | | Registration Number, if PAC | |
| Street Address | Employer/Occupation/Labor Organization* | | M | D | Y |
| City | State | Zip Code | Form(Cash,Check,etc) | | Amount |
| Full Name of Contributor | | | | Registration Number, if PAC | |
| Street Address | Employer/Occupation/Labor Organization* | | M | D | Y |
| City | State | Zip Code | Form(Cash,Check,etc) | | Amount |

* 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

835.00

Total expenditures this event

214.04

Page Total \$ **135.00**