Event Date	08/17/05
Page	1

Statement of Contributions Received at a Social or Fundraising Event

	Prescribed by S	ecretary of State 3/05							
Name of Committee in Full									
Citizens for Judge Amy Salerno		 							
Full Name of Contributor		. 48 0008 5			Registration Number, if PAC				
SEE ATTACHMENTS 1 and 2 - Au Street Address	gust 17, 2005	Event	М	D	T U	T			
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*			Y	Amount	4.050.00		
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Street Address	Employer/Occu	Employer/Occupation/Labor Organization*			Ý	Amount			
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City	State	Zip Code	Form(Ca	sh,Chec	k,etc)				
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Full Name of Contributor			Registrat	ion Num	ber, if P	AC			
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City	State	Zip Code	Form(Cas	sn,Cneck	c,etc)				
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Street Address	Employer/Occur	М	D	Y	Amount				
City	State	Zip Code	Form(Cas	sh,Check	c,etc)				
		1							

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 \$ 4.250.00
4.250.00	1.082.99	
	24	

^{*} 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)]