

# 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 To Retain Hood</b>					
Full Name of Contributor <b>Todd W. Barstow</b>				Registration Number, if PAC	
Street Address <b>616 Monticello Court</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1 8 1 5</b>
City <b>Pataskala</b>	State <b>OH</b>	Zip Code <b>43062</b>	Amount <b>\$50.00</b>		
Form (Cash, Check, etc.) <b>check</b>					
Full Name of Contributor <b>Steven Mathless</b>				Registration Number, if PAC	
Street Address <b>495 E. Mound St., Ste. B</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1 8 1 5</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Amount <b>\$50.00</b>		
Form (Cash, Check, etc.) <b>check</b>					
Full Name of Contributor <b>John J. Mackinnon</b>				Registration Number, if PAC	
Street Address <b>88 West Main St.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1 8 1 5</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Amount <b>\$50.00</b>		
Form (Cash, Check, etc.) <b>check</b>					
Full Name of Contributor <b>Ariel Jeter</b>				Registration Number, if PAC	
Street Address <b>683 Olde Mill Dr.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1 8 1 5</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43082</b>	Amount <b>\$35.00</b>		
Form (Cash, Check, etc.) <b>check</b>					
Full Name of Contributor <b>Rena N. Shak</b>				Registration Number, if PAC	
Street Address <b>2552 Shore Line Ln.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1 8 1 5</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Amount <b>\$35.00</b>		
Form (Cash, Check, etc.) <b>check</b>					
Full Name of Contributor <b>Jon J. Saia</b>				Registration Number, if PAC	
Street Address <b>713 South Front St.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1 8 1 5</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Amount <b>\$100.00</b>		
Form (Cash, Check, etc.) <b>check</b>					
Full Name of Contributor <b>Priya D. Tamilarasan</b>				Registration Number, if PAC	
Street Address <b>1832 Hobbes Dr.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1 8 1 5</b>
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>	Amount <b>\$100.00</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

**\$0.00**

Total expenditures this event.

**\$0.00**

Page Total \$ **\$420.00**