

# 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>Jeremy Day</b>				Registration Number, if PAC	
Street Address <b>989 N High St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1116</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43201</b>	Form (Cash, Check, etc.) <b>Cash</b>		Amount <b>\$20.00</b>
Full Name of Contributor <b>William Fannin</b>				Registration Number, if PAC	
Street Address <b>5410 Welbourne Pl</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1116</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$50.00</b>
Full Name of Contributor <b>Kent Trofholz</b>				Registration Number, if PAC	
Street Address <b>6767 Fleur Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1116</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43082</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$50.00</b>
Full Name of Contributor <b>Friends of Gary Schere; c/o Jeff Harr</b>				Registration Number, if PAC	
Street Address <b>P O Box 123</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1116</b>
City <b>Circleville</b>	State <b>OH</b>	Zip Code <b>43113</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$50.00</b>
Full Name of Contributor <b>Patrick John</b>				Registration Number, if PAC	
Street Address <b>2757 Abington Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1116</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$50.00</b>
Full Name of Contributor <b>Cornell Robertson</b>				Registration Number, if PAC	
Street Address <b>5434 Schatz Ln</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1116</b>
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$50.00</b>
Full Name of Contributor <b>Jody McCague</b>				Registration Number, if PAC	
Street Address <b>3315 Harrisburg-Georgesville Rd</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>3</b>	Y <b>1116</b>
City <b>Grove City</b>	State <b>OH</b>	Zip Code <b>43123</b>	Form (Cash, Check, etc.) <b>Check</b>		Amount <b>\$50.00</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 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

--	--

Total expenditures this event.

--	--

Page Total \$ **\$320.00**