

Event Date 2007

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Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 8/95

Name of Committee in Full <i>Citizens Committee for Persons with Mental Retardation</i>				
Full Name of Contributor <i>(Tailgate Party) Early Childhood Volunteers Fund Raisers /w Staff</i>			Registration number, if PAC	
Street Address <i>2879 Johnstown Road</i>	Employer/Occupation/Labor Organization*		M D Y <i>02 01 07</i>	Amount <i>426.40</i>
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43219</i>	Form (Cash, Check, etc.) <i>Cash</i>	
Full Name of Contributor <i>Bixby Fund Raisers / Parents</i>			Registration number, if PAC	
Street Address <i>4200 Bixby Road</i>	Employer/Occupation/Labor Organization*		M D Y <i>02 01 07</i>	Amount <i>236.00</i>
City <i>Crookport</i>	State <i>OH</i>	Zip Code <i>43125</i>	Form (Cash, Check, etc.) <i>Checks</i>	
Full Name of Contributor <i>Hague Fund Raisers / Parents</i>			Registration number, if PAC	
Street Address <i>4200 Bixby Road</i>	Employer/Occupation/Labor Organization*		M D Y <i>02 01 07</i>	Amount <i>75.71</i>
City <i>Crookport</i>	State <i>OH</i>	Zip Code <i>43125</i>	Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>In the form of It's Bowling Event</i>			Registration number, if PAC	
Street Address <i>2879 Johnstown Road</i>	Employer/Occupation/Labor Organization*		M D Y <i>02 01 07</i>	Amount <i>1217.00</i>
City <i>Cds,</i>	State <i>OH</i>	Zip Code <i>43219</i>	Form (Cash, Check, etc.) <i>Check</i>	
Full Name of Contributor <i>ECE Levy Fund Raisers (Shirt Sale, Super Bowl Party)</i>			Registration number, if PAC	
Street Address <i>2879 Johnstown Road</i>	Employer/Occupation/Labor Organization*		M D Y <i>03 02 07</i>	Amount <i>3390</i>
City <i>Columbus</i>	State <i>OH</i>	Zip Code <i>43215</i>	Form (Cash, Check, etc.) <i>Cash & Checks</i>	
Full Name of Contributor <i>VOLT Management Corp. (Community Fair Awards)</i>			Registration number, if PAC	
Street Address <i>P.O. Box 13500</i>	Employer/Occupation/Labor Organization*		M D Y <i>03 02 07</i>	Amount <i>350.00</i>
City <i>Orange</i>	State <i>CA</i>	Zip Code <i>92857</i>	Form (Cash, Check, etc.) <i>Check</i>	

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation rather than employer should be listed. If two or more employees donate 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 net amount for this event to form No. 31-A. Under Full Name of Contributor state "Net contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event		minus	Total expenditures this event		=	Net Amount	
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Page Total \$ 5695.11