

Statement of Contributions Received

at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <u>Citizens for Yassenoff</u>					
Full Name of Contributor <u>Joan H. Ross</u>				Registration Number, if PAC	
Street Address <u>3030 Stoney Bridge Ln.</u>	Employer/Occupation/Labor Organization*			M <u>1</u>	D <u>0</u>
City <u>Columbus</u>	State <u>O</u>	Zip Code <u>43221</u>	Y <u>9</u>	Amount <u>35.00</u>	
Form(Cash,Check,etc) <u>Check</u>					
Full Name of Contributor <u>Priscilla L. Meeks</u>					
Street Address <u>2611 Edington Rd</u>				Employer/Occupation/Labor Organization*	
City <u>Columbus</u>	State <u>O</u>	Zip Code <u>43221</u>	M <u>1</u>	D <u>2</u>	Y <u>9</u>
Form(Cash,Check,etc) <u>Check</u>				Amount <u>35.00</u>	
Full Name of Contributor <u>Peggy H. Kaplan</u>					
Street Address <u>1409 Noe Bixby Rd</u>				Employer/Occupation/Labor Organization*	
City <u>Columbus</u>	State <u>O</u>	Zip Code <u>43232</u>	M <u>1</u>	D <u>2</u>	Y <u>9</u>
Form(Cash,Check,etc) <u>Check</u>				Amount <u>35.00</u>	
Full Name of Contributor <u>Carol S. Doyle</u>					
Street Address <u>2516 Lytham Rd</u>				Employer/Occupation/Labor Organization*	
City <u>Columbus</u>	State <u>O</u>	Zip Code <u>43220</u>	M <u>1</u>	D <u>2</u>	Y <u>9</u>
Form(Cash,Check,etc) <u>Check</u>				Amount <u>35.00</u>	
Full Name of Contributor <u>Robin Comfort</u>					
Street Address <u>2275 Onandaga Dr.</u>				Employer/Occupation/Labor Organization*	
City <u>Columbus</u>	State <u>O</u>	Zip Code <u>43221</u>	M <u>1</u>	D <u>3</u>	Y <u>9</u>
Form(Cash,Check,etc) <u>Check</u>				Amount <u>50.00</u>	
Full Name of Contributor <u>E. Norene Brennen Mapes</u>					
Street Address <u>5681 Streamside Dr.</u>				Employer/Occupation/Labor Organization*	
City <u>Galena</u>	State <u>O</u>	Zip Code <u>43021</u>	M <u>1</u>	D <u>3</u>	Y <u>9</u>
Form(Cash,Check,etc) <u>Check</u>				Amount <u>50.00</u>	
Full Name of Contributor <u>Marie Schirtzinger Taris</u>					
Street Address <u>2959 Wellesley Dr.</u>				Employer/Occupation/Labor Organization*	
City <u>Columbus</u>	State <u>O</u>	Zip Code <u>43221</u>	M <u>1</u>	D <u>3</u>	Y <u>9</u>
Form(Cash,Check,etc) <u>Check</u>				Amount <u>200.00</u>	

* 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

Total expenditures this event

Page Total \$ 440.00