

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full <b>CITIZENS FOR RANKIN</b>					
Full Name of Contributor <b>TOKI M. CLARK</b>				Registration Number, if PAC	
Street Address <b>233 S. HIGH ST.</b>	Employer/Occupation/Labor Organization*			M   D   Y <b>1   0   7   0   5</b>	Amount <b>75.00</b>
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43215</b>		Form(Cash,Check,etc) <b>CHECK</b>	
Full Name of Contributor <b>CHRISTOPHER J. MINNILLO</b>				Registration Number, if PAC	
Street Address <b>1500 W. THIRD AVE. SUITE 400</b>	Employer/Occupation/Labor Organization*			M   D   Y <b>1   0   7   0   5</b>	Amount <b>75.00</b>
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43212</b>		Form(Cash,Check,etc) <b>CHECK</b>	
Full Name of Contributor <b>E. SCOTT SHAW</b>				Registration Number, if PAC	
Street Address <b>500 S. FRONT ST. SUITE 130</b>	Employer/Occupation/Labor Organization*			M   D   Y <b>1   0   7   0   5</b>	Amount <b>75.00</b>
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43215</b>		Form(Cash,Check,etc) <b>CHECK</b>	
Full Name of Contributor <b>RICHARD S. KETCHAM</b>				Registration Number, if PAC	
Street Address <b>755 S. HIGH ST.</b>	Employer/Occupation/Labor Organization*			M   D   Y <b>1   0   7   0   5</b>	Amount <b>75.00</b>
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43215</b>		Form(Cash,Check,etc) <b>CHECK</b>	
Full Name of Contributor <b>KEVIN DURKIN</b>				Registration Number, if PAC	
Street Address <b>471 E. BROAD ST SUITE 1100</b>	Employer/Occupation/Labor Organization*			M   D   Y <b>1   0   7   0   5</b>	Amount <b>75.00</b>
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43215</b>		Form(Cash,Check,etc) <b>CHECK</b>	
Full Name of Contributor <b>DONALD C. SCHUMACHER</b>				Registration Number, if PAC	
Street Address <b>755 S. HIGH STREET</b>	Employer/Occupation/Labor Organization*			M   D   Y <b>1   0   7   0   5</b>	Amount <b>75.00</b>
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43215</b>		Form(Cash,Check,etc) <b>CHECK</b>	
Full Name of Contributor <b>JON TYACK</b>				Registration Number, if PAC	
Street Address <b>536 S. HIGH ST.</b>	Employer/Occupation/Labor Organization*			M   D   Y <b>1   0   7   0   5</b>	Amount <b>75.00</b>
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43215</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, occupation 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 \$ 525.00