

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

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Alicia Healy</b>							
Full Name of Contributor <b>Mary Weaver</b>						Registration Number, if PAC	
Street Address <b>1097 Fordham Rd.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43224</b>	<b>07</b>	<b>17</b>	<b>09</b>	<b>50.00</b>
Form(Cash, Check, etc) <b>ck.</b>							
Full Name of Contributor <b>Suzanne Geiger</b>						Registration Number, if PAC	
Street Address <b>325 Siebert St.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43206</b>	<b>07</b>	<b>17</b>	<b>09</b>	<b>50.00</b>
Form(Cash, Check, etc) <b>ck.</b>							
Full Name of Contributor <b>Kevin Strous</b>						Registration Number, if PAC	
Street Address <b>1674 Gosport PL.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <b>New Albany</b>		State <b>OH</b>	Zip Code <b>43054</b>	<b>07</b>	<b>17</b>	<b>09</b>	<b>75.00</b>
Form(Cash, Check, etc) <b>ck.</b>							
Full Name of Contributor <b>Carol Collins</b>						Registration Number, if PAC	
Street Address <b>1820 Scottsdale Ave.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43235</b>	<b>07</b>	<b>17</b>	<b>09</b>	<b>25.00</b>
Form(Cash, Check, etc) <b>ck</b>							
Full Name of Contributor <b>Kathleen Gende</b>						Registration Number, if PAC	
Street Address <b>327 Siebert St.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43206</b>	<b>07</b>	<b>17</b>	<b>09</b>	<b>50.00</b>
Form(Cash, Check, etc) <b>ck.</b>							
Full Name of Contributor <b>Gary McCoy</b>						Registration Number, if PAC	
Street Address <b>2367 Halkirk N.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43229</b>	<b>07</b>	<b>17</b>	<b>09</b>	<b>50.00</b>
Form(Cash, Check, etc) <b>Cash</b>							
Full Name of Contributor <b>Mahdi Taakilo</b>						Registration Number, if PAC	
Street Address <b>4889 Sinclair Rd.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43229</b>	<b>07</b>	<b>17</b>	<b>09</b>	<b>100.00</b>
Form(Cash, Check, etc)							

\* 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 \$ **400.00**  
~~0.00~~