

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens Committee for Persons with D.D.						
Full Name of Contributor Blaugrund Hebert Kessler Miller Myers & Postalakis Inc.				Registration Number, if PAC		
Street Address 300 West Wilson Bridge Road Ste 100	Employer/Occupation/Labor Organization* N/A		M 0	D 8	Y 2011	Amount 2,000.00
City Worthington	State O H	Zip Code 43085	Form (Cash, Check, etc) check			
Full Name of Contributor Goodwill Columbus				Registration Number, if PAC		
Street Address 1331 Edgehill Road	Employer/Occupation/Labor Organization* N/A		M 0	D 8	Y 2011	Amount 10,000.00
City Columbus	State O H	Zip Code 43212	Form (Cash, Check, etc) check			
Full Name of Contributor Association for the Developmentally Disabled				Registration Number, if PAC		
Street Address 1392 Dublin Road	Employer/Occupation/Labor Organization* N/A		M 0	D 8	Y 2011	Amount 1,000.00
City Columbus	State O H	Zip Code 43215	Form (Cash, Check, etc) check			
Full Name of Contributor Sandra Denise Snailham				Registration Number, if PAC		
Street Address 183 S Sunbury Rd	Employer/Occupation/Labor Organization* N/A		M 0	D 8	Y 2011	Amount 40.00
City Westerville	State O H	Zip Code 43081	Form (Cash, Check, etc) check			
Full Name of Contributor Jed Morison				Registration Number, if PAC		
Street Address 2572 Brentwood Rd	Employer/Occupation/Labor Organization* N/A		M 0	D 8	Y 2011	Amount 36.57
City Columbus	State O H	Zip Code 43209	Form (Cash, Check, etc) check			
Full Name of Contributor Jed Morison				Registration Number, if PAC		
Street Address 2572 Brentwood Rd	Employer/Occupation/Labor Organization* N/A		M 0	D 8	Y 2011	Amount 43.43
City Columbus	State O H	Zip Code 43209	Form (Cash, Check, etc) check			
Full Name of Contributor The Ohio State University - Blankenship Hall Room 210				Registration Number, if PAC		
Street Address 901 Woody Hayes Drive	Employer/Occupation/Labor Organization* N/A		M 0	D 8	Y 2011	Amount 5,000.00
City Columbus	State O H	Zip Code 43210	Form (Cash, Check, etc) check			

* 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 \$ 18,120.00