

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Hawk</b>					
Full Name of Contributor <b>Barnaby Reagan</b>				Registration Number, if PAC	
Street Address <b>3070 Riverside Dr</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43221</b>	Y <b>2</b>	Amount <b>\$25.00</b>
Form (Cash, Check, etc.) <b>EFT</b>					
Full Name of Contributor <b>Patricia Massie</b>					
Street Address <b>1395 S 5th Ave</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43207</b>	Y <b>2</b>	Amount <b>\$20.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Traci Crabtree</b>					
Street Address <b>2725 Regina Ave</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43204</b>	Y <b>2</b>	Amount <b>\$20.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Arthur Travis</b>					
Street Address <b>955 Barclay Dr</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Galloway</b>		State <b>OH</b>	Zip Code <b>43119</b>	Y <b>2</b>	Amount <b>\$50.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Daniel Gray</b>					
Street Address <b>2999 Plymouth Ave</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43209</b>	Y <b>2</b>	Amount <b>\$50.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Tim Madison</b>					
Street Address <b>2753 Sherwood Rd</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Bexley</b>		State <b>OH</b>	Zip Code <b>43209</b>	Y <b>2</b>	Amount <b>\$50.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Kari Hertel</b>					
Street Address <b>4607 Wuertz Ct</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>8</b>
City <b>Dublin</b>		State <b>OH</b>	Zip Code <b>43016</b>	Y <b>2</b>	Amount <b>\$125.00</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, 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 also 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

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Total expenditures this event.

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Page Total \$ **\$340.00**