

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

Prescribed by Secretary of State 3/05

|                                                              |                                         |                          |                                      |                             |                        |
|--------------------------------------------------------------|-----------------------------------------|--------------------------|--------------------------------------|-----------------------------|------------------------|
| Name of Committee in Full<br><b>Gwen Callender for Judge</b> |                                         |                          |                                      |                             |                        |
| Full Name of Contributor<br><b>Richard Lederman</b>          |                                         |                          |                                      | Registration Number, if PAC |                        |
| Street Address<br><b>2731 Shelley Road</b>                   | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>5</b>               | Y<br><b>13</b>         |
| City<br><b>Shaker Heights</b>                                | State<br><b>OH</b>                      | Zip Code<br><b>44122</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</b> |
| Full Name of Contributor<br><b>David S Young</b>             |                                         |                          |                                      | Registration Number, if PAC |                        |
| Street Address<br><b>4 Kristen Lane</b>                      | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>5</b>               | Y<br><b>13</b>         |
| City<br><b>Norwalk</b>                                       | State<br><b>CT</b>                      | Zip Code<br><b>06851</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</b> |
| Full Name of Contributor<br><b>Burton Laderman</b>           |                                         |                          |                                      | Registration Number, if PAC |                        |
| Street Address<br><b>400 Creekside Drive</b>                 | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>5</b>               | Y<br><b>13</b>         |
| City<br><b>Mayfield Heights</b>                              | State<br><b>OH</b>                      | Zip Code<br><b>44143</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</b> |
| Full Name of Contributor<br><b>Jay H Trattner</b>            |                                         |                          |                                      | Registration Number, if PAC |                        |
| Street Address<br><b>26600 George Zieger Dr, Ste 304</b>     | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>5</b>               | Y<br><b>13</b>         |
| City<br><b>Beachwood</b>                                     | State<br><b>OH</b>                      | Zip Code<br><b>44122</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</b> |
| Full Name of Contributor<br><b>Miriam Friedman Karon</b>     |                                         |                          |                                      | Registration Number, if PAC |                        |
| Street Address<br><b>4850 Glengary Lane</b>                  | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>5</b>               | Y<br><b>13</b>         |
| City<br><b>Pepper Pike</b>                                   | State<br><b>OH</b>                      | Zip Code<br><b>44124</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</b> |
| Full Name of Contributor<br><b>Joy L Roth</b>                |                                         |                          |                                      | Registration Number, if PAC |                        |
| Street Address<br><b>3076 Morley</b>                         | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>5</b>               | Y<br><b>13</b>         |
| City<br><b>Shaker Heights</b>                                | State<br><b>OH</b>                      | Zip Code<br><b>44122</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</b> |
| Full Name of Contributor<br><b>Jeffrey B Marks</b>           |                                         |                          |                                      | Registration Number, if PAC |                        |
| Street Address<br><b>15718 Fernway Road</b>                  | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>5</b>               | Y<br><b>13</b>         |
| City<br><b>Cleveland</b>                                     | State<br><b>OH</b>                      | Zip Code<br><b>44120</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</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 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 \$ 350.00