

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

Prescribed by Secretary of State 03/05

Name of Committee in Full David Tyack for Judge Committee					
Full Name of Contributor Adam S. Eliot				Registration Number, if PAC	
Street Address 400 South Fifth St., Ste. 102		Employer/Occupation/Labor Organization*		M 0	D 7
City Columbus		State OH	Zip Code 43215	Y 2	Amount \$50.00
Form (Cash, Check, etc.) check					
Full Name of Contributor Charles William McGowan					
Street Address 601 South High St.		Employer/Occupation/Labor Organization* Self/Atty		M 0	D 7
City Columbus		State OH	Zip Code 43215	Y 2	Amount \$200.00
Form (Cash, Check, etc.) check					
Full Name of Contributor Kyle L. Hunter					
Street Address 601 South High St., First Floor		Employer/Occupation/Labor Organization*		M 0	D 7
City Columbus		State OH	Zip Code 43215	Y 2	Amount \$50.00
Form (Cash, Check, etc.) check					
Full Name of Contributor Angela Albert Brown					
Street Address 536 South High St.		Employer/Occupation/Labor Organization*		M 0	D 7
City Columbus		State OH	Zip Code 43215	Y 2	Amount \$50.00
Form (Cash, Check, etc.) check					
Full Name of Contributor Sean O. Boyle					
Street Address 580 South High St., Ste. 200		Employer/Occupation/Labor Organization*		M 0	D 7
City Columbus		State OH	Zip Code 43215	Y 2	Amount \$50.00
Form (Cash, Check, etc.) check					
Full Name of Contributor J. Scott Weisman					
Street Address 600 South High St., First Floor		Employer/Occupation/Labor Organization* Self/Attorney		M 0	D 7
City Columbus		State OH	Zip Code 43215	Y 2	Amount \$200.00
Form (Cash, Check, etc.) check					
Full Name of Contributor Yavitch & Palmer Co., LPA					
Street Address 511 South High St.		Employer/Occupation/Labor Organization*		M 0	D 7
City Columbus		State OH	Zip Code 43215	Y 2	Amount \$500.00
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 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

\$2,470.00

Total expenditures this event.

\$0.00

Page Total \$ **\$1,100.00**