31-E
R.C. 3517.10(B)

Event Date 7-21-11
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full							
David Young For Judge Committee							
Full Name of Contributor			Registration Number, if PAC				
Andy Cecil							
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount	
495 S. High, Ste 400	Cecil & Geiser		07	27	11	200.00	
City	State	Zip Code	Form(Cash,Check,etc)				
Columbus	OH	43215	Check				
Full Name of Contributor			Registration Number, if PAC				
Cynthia Lazarus							
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount	
88 W. Beechwood Blvd.			07	21	11	100.00	
City	State	Zip Code	Form(Cash,Check,etc)				
Columbus	OH	43214	Check				
Full Name of Contributor			Registration Number, if PAC				
Dean Reihard							
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount	
501 S. High Street			07	25	11	100.00	
City	State	Zip Code	Form(Cash,Check,etc)				
Columbus	OH	43215	Check				
Full Name of Contributor			Registration Number, if PAC				
David C. Stebbins							
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount	
544 Piedmont			07	15	11	100.00	
City	State	Zip Code	Form(Cash,Check,etc)				
Columbus	OH	43214	Check				
Full Name of Contributor			Registration Number, if PAC				
Charles W. Kranstuber							
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount	
5512 Caplestone Lane			07	18	11	100.00	
City	State	Zip Code	Form(Cash,Check,etc)				
Dublin	OH	43017	Check				
Full Name of Contributor			Registration Number, if PAC				
Isaac, Brant Ledman & Tetor LLP							
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount	
250 E. Broad			07	18	11	100.00	
City	State	Zip Code	Form(Cash,Check,etc)				
Columbus	OH	43215	Check				
Full Name of Contributor			Registration Number, if PAC				
Rick Ketcham							
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount	
755 South High Street			07	18	11	100.00	
City	State	Zip Code	Form(Cash,Check,etc)				
Columbus	OH	43215	Cash				

* 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 $ 800.00