

Event Date: 02/01/2018 Page: 6

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

Form 31-E R.C. 3517.10(B)

			R.C. 3517.10(8)		
Full Name of Committee					
Committee to Re-elect Judg	ge Gill				
ull Name of Contributor			Registration Number, if PAC		
Colins & Slagle Co., LPA					
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount	
21 E. State Street; Ste. 2300			02/01/18	\$3,800.00	
City	State	Zip Code	Form: Cash, Check, etc		
Columbus	ОН	43215	CHECK		
Full Name of Contributor	Registration Number, if PAC				
Mark Collins					
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount	
492 S. High Street, 3 rd Floor			02/01/18	\$200.00	
City	State	Zip Code	Form: Cash, Check, etc		
Columbus	ОН	43215	CHECK		
Full Name of Contributor			Registration Number, if PAC		
Colette Compton					
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount	
485 S. Parkview Ave #115			02/01/18	\$50.00	
City	State	Zip Code	Form: Cash, Check, etc		
Columbus	ОН	43209	CHECK		
Full Name of Contributor	Registration Number,	if PAC			
Michael Delligatti					
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount	
500 S. Front St. #1150		<u> </u>	02/01/18	\$150.00	
City	State	Zip Code	Form: Cash, Check, etc		
Columbus	ОН	43215	CHECK		
Full Name of Contributor	Registration Number, if PAC				
Desanto & McNichols					
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount	
887 S. High Street	,	<u> </u>	02/01/18	\$750.00	
City	State	Zip Code	Form: Cash, Check, etc CHECK		
Columbus	ОН	43206		" 0.4.0	
	Full Name of Contributor			Registration Number, if PAC	
Donald Dick		Employer/Occupation/Organization	111/00/00/07	A == =	
Street Address		employer/Occupation/Organization	MM/DD/YYYY	Amount \$200.00	
3080 Valleyview Drive	C1 1	7in Cools	02/01/18 Form: Cash, Check, etc.	φ200.00	
City	State	Zip Code 43204	CHECK		
Columbus Full Name of Contributor	ОН	43204	Registration Number,	if PAC	
	Registration Northbel,	11770			
Robert Ferguson	Employer/Occupation/Organization	MM/DD/YYYY	Amount		
Street Address		Employer occopation organization	02/01/18	\$100.00	
246 Lansing Street	State	Zip Code	Form: Cash, Check, etc		
Columbus	OH	43206	CHECK		
Columbus	$\Gamma \cap \Gamma$	40200	CHLON		

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.

**Contributors are contributed expect or efform No. 21-E" and list the date of the event in the date column.

* connotes court appointed expert or attorney/GAL list

** relative of court employee

Total Contributions This Event	Total Expenses This Event	
) Total Commoditions mis Evern		Page Total: \$5,250
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