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

Event Date 8/27/10	
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Prescribed by Secretary of State 03/05

Name of Committee in Full CAMPBELL FOR JUDGE			<u> </u>
Full Name of Contributor Earnestine Sledge		Registration Number, if PAC	
Street Address 3803 S. Warrendale Road	Employer/Occupation/Labor Organization*		M D Y Amount 0 8 2 7 1 0 \$20.10
City South Euclid	State OH	Zip Code 44118	Form (Cash, Check, etc.)
Full Name of Contributor			Registration Number, if PAC
Sandra Surratt			
Street Address 4959 Mayfield	Employer/Occupation/Labor Organization*		0 8 2 7 1 0 \$20.10
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Lyndhurst	OH_	44124	ck
Full Name of Contributor Stephanie Surratt			Registration Number, if PAC
Street Address 1333 Cort	Employer/Occupation/Labor Organization*		0 8 2 7 1 0 \$20.10
City	Staj te	Zip Code	Form (Cash, Check, etc.)
East Cleveland	OH	44112	ck
Full Name of Contributor			Registration Number, if PAC
Valerie Purdy			
Street Address 361 Briarcliff Ave.	Employer/Occupation/Labor Organization*		0 8 2 7 1 0 \$20.10
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Alliance	OH	44601	ck
Full Name of Contributor Kathleen Purdy			Registration Number, if PAC
Street Address 361 Briarcliff Ave.	Employer/Occupation/Labor Organization*		0 8 2 7 1 0 Amount \$20.10
City Alliance	State OH	Zip Code 44601	Form (Cash, Check, etc.)
Full Name of Contributor Reona Sledge			Registration Number, if PAC
Street Address 17512 Nottingham Rd	Employer/Occupation/Labor Organization*		0 8 2 7 1 0 Amount \$30.00
City Cleveland	Stal te OH	Zip Code 44149	Form (Cash, Check, etc.)
Full Name of Contributor Mike Alexander			Registration Number, if PAC
Street Address 10319 Glenmary Farm Drive	Employer/Occupation/Labor Organization*		0 8 2 7 1 0 \$300.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Louisville	KY	40291	ck

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.
\$0.00	\$0,00

Page Total \$ \$430.50

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)]