

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

Prescribed by Secretary of State 03/05

Name of Committee in Full							
McIntosh For Judge Committee							
Full Name of Contributor				Registration Number, if PAC			
Alvin Pelt							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
8043 Storrow Dr.				0	9	2806	\$100.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Westerville		OH	43081	Check			
Full Name of Contributor				Registration Number, if PAC			
AMR							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
1143 Summer Hill Circle				0	9	1806	\$75.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Gahanna		OH	43230	Check			
Full Name of Contributor				Registration Number, if PAC			
Anthony L. & Yvette McGee Brown							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
643 Crossing Creek S.				0	9	2806	\$200.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Gahanna		OH	43230	Check			
Full Name of Contributor				Registration Number, if PAC			
Bailey Cavalieri LLC							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
10 W. Broad St.				0	9	2906	\$500.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus		OH	43215	Check			
Full Name of Contributor				Registration Number, if PAC			
Bernard M. Floetker Attorney at Law							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
1295 S. High St.				0	9	2806	\$100.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus		OH	43206	Check			
Full Name of Contributor				Registration Number, if PAC			
Christopher M. Cooper Esq. & Karen Cooper							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
286 Marjoran Drive				0	9	2906	\$100.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Gahanna		OH	43230	Check			
Full Name of Contributor				Registration Number, if PAC			
Columbus Franklin County AFL CIO PCE							
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount
1545 Alum Creek Dr. 2nd. Fl.				0	9	2506	\$200.00
City		State	Zip Code	Form (Cash, Check, etc.)			
Columbus		OH	43209	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

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ 1,275.00