

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Elect Kline for Judge							
Full Name of Contributor George W. Leach Law Offices LLC					Registration Number, if PAC		
Street Address 100 E Main St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 0	D 2	Y 0	Y 1	Amount \$300.00
Full Name of Contributor Despetorich Law Offices, LLC					Registration Number, if PAC		
Street Address 100 E Main St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 0	D 2	Y 0	Y 1	Amount \$300.00
Full Name of Contributor Craig A. Sutherland					Registration Number, if PAC		
Street Address 20 Northwoods Blvd. Suite E		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43235	M 0	D 1	Y 3	Y 0	Amount \$100.00
Full Name of Contributor Abigail & Jonah Saving					Registration Number, if PAC		
Street Address 539 Warner Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Logan	State OH	Zip Code 43138	M 0	D 2	Y 0	Y 2	Amount \$50.00
Full Name of Contributor Robert & Jennifer Soccorsi					Registration Number, if PAC		
Street Address 467 1/2 N High St, Apt 3C		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 0	D 2	Y 0	Y 3	Amount \$100.00
Full Name of Contributor Poling Law					Registration Number, if PAC		
Street Address 100 East Main Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43125	M 0	D 2	Y 1	Y 2	Amount \$200.00
Full Name of Contributor Marilyn J. Tomasi					Registration Number, if PAC		
Street Address 160 N. Wall St Apt 304		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43215	M 0	D 2	Y 1	Y 0	Amount \$100.00
Full Name of Contributor Total Contributions from form 31-E					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State OH	Zip Code	M 0	D 2	Y 0	Y 2	Amount \$2,820.00

* 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)]

Page Total **\$3,970.00**