

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>David Young for Judge Committee</b>					
Full Name of Contributor <b>Jeremy Dodgion Attorney at Law Co., LPA</b>				Registration Number, if PAC	
Street Address <b>1188 South High Street</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>150.00</b>
Full Name of Contributor <b>Mango Law LLC</b>				Registration Number, if PAC	
Street Address <b>5649 Van Wert Dr</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>11</b>
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>SMDHLS Bonding Co LLC</b>				Registration Number, if PAC	
Street Address <b>571 South High St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Toure McCord</b>				Registration Number, if PAC	
Street Address <b>844 S. Front Street</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Cash</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Allison Aiello</b>				Registration Number, if PAC	
Street Address <b>4710 Coolbrook Drive</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>11</b>
City <b>Hilliard</b>	State <b>OH</b>	Zip Code <b>43026</b>	Form(Cash,Check,etc) <b>Cash</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Craig Gould</b>				Registration Number, if PAC	
Street Address <b>673 Mohawk St</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Cash</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Anonymous Cash Contributions</b>				Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>11</b>
City	State <b>OH</b>	Zip Code	Form(Cash,Check,etc) <b>Cash</b>		Amount <b>345.00</b>

\* 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 \$ 945.00