



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee Committee to Elect McCaughan for Judge				
Full Name of Contributor Gregg Lewis			Registration Number, if PAC	
Street Address 625 City Park Ave	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43206	Date (MM/DD/YYYY) 04/05/2018	Amount \$100
Full Name of Contributor Diane Spiezio			Registration Number, if PAC	
Street Address 1001 Forward Pass Rd, SW	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Visa	
City Pataskala	State OH	Zip Code 43062	Date (MM/DD/YYYY) 04/07/2018	Amount \$100.00
Full Name of Contributor Jerry Malone, MD			Registration Number, if PAC	
Street Address 9155 Moors Pl, N	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) AmEx	
City Dublin	State OH	Zip Code 43017	Date (MM/DD/YYYY) 04/07/2018	Amount \$600.00
Full Name of Contributor Tami Ranalli			Registration Number, if PAC	
Street Address 6007 Deansboro Dr.	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Visa	
City Westerville	State OH	Zip Code 43081	Date (MM/DD/YYYY) 04/04/2018	Amount \$50.00
Full Name of Contributor Holly Brown			Registration Number, if PAC	
Street Address 4190 Kendale Rd	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Visa	
City Columbus	State OH	Zip Code 43220	Date (MM/DD/YYYY) 04/12/2018	Amount \$100.00

*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)]