



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

Form 31-E
R.C. 3517.10(B)

Full Name of Committee				
Committee to Re-elect Judge Gill				
Full Name of Contributor			Registration Number, if PAC	
Jamie Bryan				
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount
3608 Christopher Place			03/22/18	\$100.00
City	State	Zip Code	Form: Cash, Check, etc	
Grove City	OH	43123	PAYPAL	
Full Name of Contributor			Registration Number, if PAC	
Cara Dawson				
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount
139 E. Main Street			03/22/18	\$50.00
City	State	Zip Code	Form: Cash, Check, etc	
Columbus	OH	43215	SQUARE	
Full Name of Contributor			Registration Number, if PAC	
Christopher Tamms				
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount
5 West Main Street			03/22/18	\$50.00
City	State	Zip Code	Form: Cash, Check, etc	
Westerville	OH	43081	SQUARE	
Full Name of Contributor			Registration Number, if PAC	
Tim D'Angelo				
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount
33 E. Columbus Street			03/22/18	\$200.00
City	State	Zip Code	Form: Cash, Check, etc	
Columbus	OH	43206	SQUARE	
Full Name of Contributor			Registration Number, if PAC	
Kimberly Ciprian				
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount
6169 Bract Road			03/22/18	\$25.00
City	State	Zip Code	Form: Cash, Check, etc	
Westerville	OH	43081	SQUARE	
Full Name of Contributor			Registration Number, if PAC	
Carolynn Fittro*				
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount
1335 Dublin Road, Suite 104D			03/22/18	\$50.00
City	State	Zip Code	Form: Cash, Check, etc	
Columbus	OH	43215	SQUARE	
Full Name of Contributor			Registration Number, if PAC	
Zachary Gwin				
Street Address		Employer/Occupation/Organization	MM/DD/YYYY	Amount
79 Dakota Avenue			03/22/18	\$30.00
City	State	Zip Code	Form: Cash, Check, etc	
Columbus	OH	43222	SQUARE	
Full Name of Contributor			Registration Number, if PAC	

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.

* connotes court appointed expert or attorney/GAL list

** relative of court employee

Total Contributions This Event	Total Expenses This Event	Page Total: \$ 505
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