

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Committee to Retain Judge Reece							
Full Name of Contributor Tyack, Blackmore, Liston & Nigh Co., LPA				Registration Number, if PAC			
Street Address 536 South High Street		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Columbus		O H		0	2	2	150.00
City		Zip Code		Form(Cash, Check, etc)			
Columbus		43215		Check			
Full Name of Contributor Keith A. Yeazel				Registration Number, if PAC			
Street Address 5354 North High Street		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Columbus		O H		0	2	2	150.00
City		Zip Code		Form(Cash, Check, etc)			
Columbus		43214		Check			
Full Name of Contributor John H. Bates				Registration Number, if PAC			
Street Address 495 S. High Street, Suite 400		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Columbus		O H		0	3	0	150.00
City		Zip Code		Form(Cash, Check, etc)			
Columbus		43215		Check			
Full Name of Contributor Benesch, Friedlander, Coplan & Aronoff LLP				Registration Number, if PAC			
Street Address 41 South High Street, Suite 2600		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Columbus		O H		0	3	0	500.00
City		Zip Code		Form(Cash, Check, etc)			
Columbus		43215		Check			
Full Name of Contributor Sarah Creedon				Registration Number, if PAC			
Street Address 2087 Kentwell Road		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Upper Arlington		O H		0	3	0	100.00
City		Zip Code		Form(Cash, Check, etc)			
Upper Arlington		43221		Check			
Full Name of Contributor Troy Doucet				Registration Number, if PAC			
Street Address 4200 Regent Street, Suite 200		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Columbus		O H		0	3	1	150.00
City		Zip Code		Form(Cash, Check, etc)			
Columbus		43219		Check			
Full Name of Contributor Jeffrey A. Berndt				Registration Number, if PAC			
Street Address 575 S. High Street		Employer/Occupation/Labor Organization*		M	D	Y	Amount
Columbus		O H		0	4	0	200.00
City		Zip Code		Form(Cash, Check, etc)			
Columbus		43215		Check			

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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
17,325.00

Total expenditures this event

Page Total \$ **1,400.00**