

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

Prescribed by Secretary of State 03/05

Name of Committee in Full McKinley for Judge				
Full Name of Contributor Plymale & Dingus LLC			Registration Number, if PAC	
Street Address 111 West Rich Street, Suite 600	Employer/Occupation/Labor Organization*		M D Y 0 8 2 7 1 3	Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor Citizens to Elect Mike Schadek			Registration Number, if PAC	
Street Address 1537 Guilford Road	Employer/Occupation/Labor Organization*		M D Y 0 8 2 7 1 3	Amount \$100.00
City Columbus	State OH	Zip Code 43221	Form (Cash, Check, etc.) Check	
Full Name of Contributor Jon S. Shaffer			Registration Number, if PAC	
Street Address 1371 Haddon Road	Employer/Occupation/Labor Organization* Consultant, Nationwide Ins.		M D Y 0 8 2 7 1 3	Amount \$100.00
City Columbus	State OH	Zip Code 43209	Form (Cash, Check, etc.) Check	
Full Name of Contributor Steven M. Shellabarger			Registration Number, if PAC	
Street Address 845 N High Street, #402	Employer/Occupation/Labor Organization* Not employed, Retired		M D Y 0 8 2 7 1 3	Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor Donna Wilson			Registration Number, if PAC	
Street Address 3217 Glenellen Court	Employer/Occupation/Labor Organization* Consultant, Wilson Group		M D Y 0 8 2 7 1 3	Amount \$100.00
City Columbus	State OH	Zip Code 43221	Form (Cash, Check, etc.) Check	
Full Name of Contributor Richanne Zymkoski			Registration Number, if PAC	
Street Address 2128 Poplar Street	Employer/Occupation/Labor Organization* Not employed, Retired		M D Y 0 8 2 7 1 3	Amount \$100.00
City Columbus	State OH	Zip Code 43207	Form (Cash, Check, etc.) Check	
Full Name of Contributor Daniel L. DeLuna			Registration Number, if PAC	
Street Address 5066 Sutherland Drive	Employer/Occupation/Labor Organization* Legal Aid, Bowers & Assoc		M D Y 0 8 2 7 1 3	Amount \$50.00
City Columbus	State OH	Zip Code 43207	Form (Cash, Check, etc.) Check	

* 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

Total contributions this event

\$1,995.00

Total expenditures this event.

\$0.00

Page Total \$ 6650.00