31-E R.C. 3517.10(B)

Event Date	4/10/14
Page	26

Statement of Contributions Received at a Social or Fundraising Event

	Prescribe	d by Secr	retary of State 3/05					
Name of Committee in Full	•							
David Young for Judge Committee								
Full Name of Contributor				Registration Number, if PAC				
Abraham Law Offices				M				
Street Address	Employe	Employer/Occupation/Labor Organization*			D	Y	Amount	400.00
24 N High St				$0 \mid 4$	1 2	1 4		100.00
City	Sta		Zip Code		sh,Check		36.	A (1) (1)
Columbus		<u>H</u>	43215		<u>Checl</u>		diameter of the	de de la
Full Name of Contributor				Registra	tion Numl	ber, if PA	С	
Carpenter Lipps & Leland LLP			<u> </u>		,	,,		
Street Address	Employe	г/Оссира	tion/Labor Organization*	M	D	Y	Amount	400.00
280 N High St, Ste 1300				0 4		$1 \mid 4$		100.00
City	St	ate	Zip Code	(ish,Check			
Columbus		H	43215		Checl		O TO UP 3	up Bality
Full Name of Contributor				Registra	tion Num	ber, if PA	С	
Curry Roby & Mulvey Co LLC				<u> </u>				
Street Address	Employe	т/Осспра	tion/Labor Organization*	М	D	Y	Amount	
30 Northwoods Blvd, Ste 300	<u> </u>	_		0 4	1 2	1 4		100.00
City	St	ate	Zip Code	,	sh,Check			Marie 1889
Columbus		_ H	43235		Checl			
Full Name of Contributor		<u>-</u>		Registra	tion Num	ber, if PA	С	
Roth Law Group LLC		_						
Street Address	Employe	r/Occupa	tion/Labor Organization*	М	D	[Y]	Amount	
24 N High St, Ste 301				0 4		1 4		100.00
City	St	ate	Zip Code	Form(Ca	ish,Check	etc)	[[清景][[水]]	
Columbus		H	43215		<u>Cheçl</u>	ζ		基础 基本的
Full Name of Contributor				Registra	tion Num	ber, if PA	C	
Vassy Law Office		_						
Street Address	Employe	Employer/Occupation/Labor Organization*			D	Y	Amount	
145 E Rich St, 2nd Fl				0 4		$1 \mid 4$		100.00
City	St	ate	Zip Code		sh,Check		restance in	THE PARTY
Columbus		<u> H</u>	43215		<u>Checl</u>		的数据证据 。	
Full Name of Contributor			<u>. </u>	Registra	tion Num	ber, if PA	C	
Lerner & Shea LLC								
Street Address	Employe	r/Occupa	tion/Labor Organization*	M	D	Y	Amount	
500 S Front St, Ste 260					1 2		l	100.00
City	St	ate	Zip Code		ish,Check			
Columbus		<u>H</u>	<u>43215</u>		<u>Checl</u>	ς	Ya. E.	
Full Name of Contributor				Registra	tion Num	ber, if PA	.c	
Jeremy Dodgion Attorney at Law Co I	_PA							
Street Address		Employer/Occupation/Labor Organization*			D	Υ	Amount	
1188 S High St				0 4 1 2 1 4				100.00
City	St	State Zip Code		Form(Cash,Check,etc)			" "	"教育 "
Columbus		H	43206	Ш.	Checl	k	Keyr 3 CV	推制超过

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 S 700.00
<u> </u>	<u> </u>	

^{*} 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)]