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

Event Date 1/22/15	
Page 12	

Prescribed by Secretary of State 03/05

Glaeden for Judge					
David Kennedy Suret Address Check etc.	Name of Committee in Full Glaeden for Judge				
107 W. Johnstown Rd.				Registration Number, if PAC	
Gahanna		Employer/Occupation/Labor Organization*			
Pohler & Associates LLC		· · · · · · · · · · · · · · · · · · ·	■		
State Zip Code Check C		•	<u>'</u>	Registration Number, if PAC	
Reynoldsburg		Employer/Occup	oation/Labor Organization*		
Bricker & Eckler LLP PAC	Reynoldsburg	1	1 '		
100 S. Third St.					
Columbus	100 S. Third St.	Employer/Occup	pation/Labor Organization*		
Crabbe, Brown & James Street Address Employer/Occupation/Labor Organization* N					
Sure			_	Registration Number, if PAC	
Columbus		Employer/Occup	ation/Labor Organization*	1 6 1 1 1 6 8	
Ohio Cable Telecommunications Association Political Action Trust Sirect Address 2520 Haverford Rd. Employer/Occupation/Labor Organization* O 1 2 2 1 5 \$Amount \$\$200.00\$ City Columbus Full Name of Contributor Grange Mutual Casualty Company- Ohio PAC Sirect Address 671 S. High St. Employer/Occupation/Labor Organization* O 1 2 2 2 1 5 \$Amount \$\$200.00\$ Registration Number, if PAC CP677 Sirect Address 671 S. High St. Employer/Occupation/Labor Organization* O 1 2 2 2 1 5 5 Amount \$\$250.00\$ City Columbus Employer/Occupation/Labor Organization* Registration Number, if PAC Street Address Employer/Occupation/Labor Organization* Registration Number, if PAC Street Address Employer/Occupation/Labor Organization* Registration Number, if PAC Street Address Employer/Occupation/Labor Organization* Full Name of Contributor Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.) Amount Form (Cash, Check, etc.)	Columbus		1 '		
2520 Haverford Rd.	Ohio Cable Telecommunications Associat	ion Political Action Trust		Registration Number, if PAC	
Columbus OH 43220 Check Full Name of Contributor Grange Mutual Casualty Company- Ohio PAC Street Address 671 S. High St. Employer/Occupation/Labor Organization* Stafte OH Stafte O	2520 Haverford Rd.		ation/Labor Organization*	0 1 2 2 1 5 \$200.00	
Grange Mutual Casualty Company- Ohio PAC Street Address 671 S. High St. City Columbus Full Name of Contributor Street Address Employer/Occupation/Labor Organization* O 1 2 2 1 5 Amount \$250.00 Form (Cash, Check, etc.) Check Registration Number, if PAC Street Address Employer/Occupation/Labor Organization* NI D Y Amount Street Address City OH Stafte OH Staf	Columbus			Check	
671 S. High St. City Columbus Street Address Employer/Occupation/Labor Organization* O 1 2 2 1 5 \$250.00 Street Address Employer/Occupation/Labor Organization* M D Y Amount City City City City City City City Ci	Grange Mutual Casualty Company- Ohio F				
Columbus OH 43206 Check Registration Number, if PAC Street Address Employer/Occupation/Labor Organization* NI D Y Amount City State OH State OH	671 S. High St.	Employer/Occup	-	0 1 2 2 1 5 \$250.00	
Street Address Employer/Occupation/Labor Organization* M D Y Amount City Sta' te OH Zip Code Form (Cash, Check, etc.)	Columbus		Zíp Code 43206		
City Sta' te OH Sta' te OH Sta' te OH Sta' te OH	Full Name of Contributor			Registration Number, if PAC	
OH	Street Address	Employer/Occup	nation/Labor Organization*	M D Y Amount	
* Demind Control (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		ОН	Zîp Code	Form (Cash, Check, etc.)	

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

in the date column		
Total contributions this event	Total expenditures this event.	
\$8,725.00	\$0.00	

Page Total \$ 2,200.00

^{*} 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)]