

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>David Young for Judge Committee</b>					
Full Name of Contributor <b>Subpeona Service Plus, LLC</b>				Registration Number, if PAC	
Street Address <b>PO Box 126</b>	Employer/Occupation/Labor Organization*		M <b>11</b>	D <b>09</b>	Y <b>11</b>
City <b>Galloway</b>	State <b>OH</b>	Zip Code <b>43119</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Paul T Khoury</b>				Registration Number, if PAC	
Street Address <b>704 Neil Ave</b>	Employer/Occupation/Labor Organization*		M <b>11</b>	D <b>09</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Craig E Gould</b>				Registration Number, if PAC	
Street Address <b>205 Fallis Road</b>	Employer/Occupation/Labor Organization*		M <b>11</b>	D <b>09</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43214</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Rebecca Gooch</b>				Registration Number, if PAC	
Street Address <b>336 South High Street</b>	Employer/Occupation/Labor Organization*		M <b>11</b>	D <b>09</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>Paul Scott Co LPA</b>				Registration Number, if PAC	
Street Address <b>536 S High St</b>	Employer/Occupation/Labor Organization*		M <b>11</b>	D <b>09</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>150.00</b>
Full Name of Contributor <b>Frances M Weiner</b>				Registration Number, if PAC	
Street Address <b>96 Bishop Square</b>	Employer/Occupation/Labor Organization*		M <b>11</b>	D <b>09</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>250.00</b>
Full Name of Contributor <b>Nancy K. Wonnell</b>				Registration Number, if PAC	
Street Address <b>336 S High St</b>	Employer/Occupation/Labor Organization*		M <b>11</b>	D <b>09</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>

\* 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)]

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

**1,150.00**

Total expenditures this event

**153.68**

Page Total \$ **850.00**