Event Date 4/21/11	
Page 1	

Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Name of Committee to Re-Elect Judge Maynard Registration Number, if PAC		
Hastie Law Offices Street Address 1441 King Street Suite 101 City Columbus OH 43212 Check Form (Cash, Check, etc.) Check Full Name of Contributor Nathan Sei Akamine Street Address 844 S Front Street City Columbus OH 43206 Employer/Occupation/Labor Organization* OH 43206 Full Name of Contributor Registration Number, if PAC Amount Survet Address Street Address OH 43206 Check Full Name of Contributor RWilliam Meeks Street Address Employer/Occupation/Labor Organization* OH 43206 Check Registration Number, if PAC Check Full Name of Contributor RWilliam Meeks Street Address Street Address OH 43215 Check Form (Cash, Check, etc.) Check Registration Number, if PAC Check Full Name of Contributor City Stal te Zip Code OH 43215 Check Form (Cash, Check, etc.) Check Full Name of Contributor Carpenter Lipps & Leland Street Address 280 N High Street Suite 1300 Employer/Occupation/Labor Organization* M D Y Amount Street Address Check Registration Number, if PAC		
1441 King Street Suite 101	Registration Number, if PAC	
Columbus)	
Nathan Sei Akamine Street Address Employer/Occupation/Labor Organization* M D Y Amount \$200.00		
Sta te		
Columbus	0	
Street Address		
511 S. High Street		
Columbus OH 43215 Check Full Name of Contributor Carpenter Lipps & Leland Street Address Employer/Occupation/Labor Organization* M D Y Amount 280 N High Street Suite 1300 Employer/Occupation/Labor Organization* M D Y Amount 280 N High Street Suite 1300 P Y Amount 0 4 2 1	0	
Carpenter Lipps & Leland Street Address Employer/Occupation/Labor Organization* M D YI Amount 280 N High Street Suite 1300 0 4 2 1 1 1 \$75.00		
280 N High Street Suite 1300 0 4 2 1 1 1 \$75.00		
)	
City State Zip Code Form (Cash, Check, etc.) Columbus OH 43215 Check		
Full Name of Contributor Jeremy Dodgion Registration Number, if PAC		
Street Address 1188 S High Street Employer/Occupation/Labor Organization* M	iO	
City Sta te Zip Code Form (Cash, Check, etc.) Columbus OH 43206 Check		
Full Name of Contributor Gregg D Slemmer Registration Number, if PAC		
Street Address 1188 S. High Street D	0	
City State Zip Code OH 43206 Form (Cash, Check, etc.) Check		
Full Name of Contributor David H Thomas Registration Number, if PAC		
Street Address 511 S High Street Employer/Occupation/Labor Organization* M D Y Amount \$250.0	0	
City Columbus State Zip Code Form (Cash, Check, etc.) Check Columbus Columb		

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 No. 31-E" and list the date of the event in the date column

lotai	contributions this event
	7
	\$0.00
Í	·

Total expenditures this event.

\$0.	00

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)]