

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

Event Date: November 29,
2011
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Prescribed by Secretary of State 3/05

Name of Committee in Full: COMMITTEE TO RE-ELECT JUDGE GILL					
Full Name of Contributor Harlan Robins				Registration Number, if PAC	
Street Address 25 Sessions Drive		Employer/Occupation/Organization			Form (Cash, Check, etc.) Check
City Bexley	State OH	Zip Code 43209	M/D/Y 11/29/11	\$150.00	
Full Name of Contributor Michael Rourke				Registration Number, if PAC	
Street Address 495 S. High St., Suite 450		Employer/Occupation/Organization Rourke & Blumenthal LLP			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	M/D/Y 11/29/11	\$150.00	
Full Name of Contributor Brian Russell				Registration Number, if PAC	
Street Address 6911 Linbrook Blvd		Employer/Occupation/Organization			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43235	M/D/Y 11/29/11	\$150.00	
Full Name of Contributor Jon Saia				Registration Number, if PAC	
Street Address 713 S. Front St.		Employer/Occupation/Organization Saia & Piatt Inc.			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43206	M/D/Y 11/29/11	\$150.00	
Full Name of Contributor Harvey Samuels				Registration Number, if PAC	
Street Address 500 S. Front St., Suite 1150		Employer/Occupation/Organization			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	M/D/Y 11/29/11	\$200.00	
Full Name of Contributor Lee Smith				Registration Number, if PAC	
Street Address 929 Harrison Avenue., Ste 300		Employer/Occupation/Organization			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	M/D/Y 11/29/11	\$150.00	
Full Name of Contributor Ron Solove				Registration Number, if PAC	
Street Address 79 Thurman Ave.		Employer/Occupation/Organization Solove and McCormick			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43206	M/D/Y 11/29/11	\$300.00	
Full Name of Contributor David Stebbins				Registration Number, if PAC	
Street Address 544 Piedmont Road		Employer/Occupation/Organization			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43214	M/D/Y 11/29/11	\$150.00	

* 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 appear. [R.C. 3517.10(B)(4)]