

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Committee to Re-Elect Judge Maynard</b>					
Full Name of Contributor <b>Alpha Phi Alpha Fraternity</b>				Registration Number, if PAC	
Street Address <b>P.O. Box 360464</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43236</b>	Y <b>1</b>	Amount <b>\$200.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Philip T Daniel</b>				Registration Number, if PAC	
Street Address <b>8161 Flint Rd</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43235</b>	Y <b>1</b>	Amount <b>\$200.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Vernard V Howard</b>				Registration Number, if PAC	
Street Address <b>1417 Knollwood Dr E</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43232</b>	Y <b>1</b>	Amount <b>\$50.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Donald Bess</b>				Registration Number, if PAC	
Street Address <b>9523 Haaf Farm Dr NW</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Pickerington</b>		State <b>OH</b>	Zip Code <b>43147</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>William McDaniel</b>				Registration Number, if PAC	
Street Address <b>1411 Kenwick</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43209</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>William Butler</b>				Registration Number, if PAC	
Street Address <b>440 N Nelson Rd</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Colmbus</b>		State <b>OH</b>	Zip Code <b>43219</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Money Order</b>					
Full Name of Contributor <b>Cecil Jones</b>				Registration Number, if PAC	
Street Address <b>7885 Maple Grove Dr</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Lewis Center</b>		State <b>OH</b>	Zip Code <b>43035</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Cash</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 also 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

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Total expenditures this event.

<b>\$0.00</b>
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Page Total \$ **\$850.00**