

## 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>Lisa S. Diemer</b>			Registration Number, if PAC		
Street Address <b>2720 E. Cleft Dr.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Upper Arlington</b>	State <b>OH</b>	Zip Code <b>43221</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Richanne M. Zymkoski</b>			Registration Number, if PAC		
Street Address <b>2128 Poplar Street</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43207</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Benjamin C. Moore</b>			Registration Number, if PAC		
Street Address <b>248 Apache Cir.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>75.00</b>
Full Name of Contributor <b>Tammy J. Evans</b>			Registration Number, if PAC		
Street Address <b>5849 Harrisburg Pike</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Grove City</b>	State <b>OH</b>	Zip Code <b>43123</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>Shawn R. Dominy</b>			Registration Number, if PAC		
Street Address <b>3837 Attuks Drive</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Powell</b>	State <b>OH</b>	Zip Code <b>43065</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>200.00</b>
Full Name of Contributor <b>Amber A. Tewksbury</b>			Registration Number, if PAC		
Street Address <b>1629 College Park Dr.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Dominic Mango</b>			Registration Number, if PAC		
Street Address <b>5649 Van Wert Dr.</b>	Employer/Occupation/Labor Organization* <b>Mango Law LLC</b>		M <b>0</b>	D <b>4</b>	Y <b>2</b>
City <b>Hilliard</b>	State <b>OH</b>	Zip Code	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</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

1,360.00

Total expenditures this event

Page Total \$ 675.00