

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

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Gwen Callender for Judge</b>				
Full Name of Contributor <b>David T Donofrio</b>			Registration Number, if PAC	
Street Address <b>7565 Sawmill Commons Lane, Apt C</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   8   3   1   1   3</b>	Amount <b>50.00</b>
City <b>Dublin</b>	State <b>O   H</b>	Zip Code <b>43016</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Thomas L Beck</b>			Registration Number, if PAC	
Street Address <b>6840 Downs Street</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   8   3   1   1   3</b>	Amount <b>50.00</b>
City <b>Worthington</b>	State <b>O   H</b>	Zip Code <b>43085</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>W David Ready Jr</b>			Registration Number, if PAC	
Street Address <b>5611 Old Pond Drive</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   8   3   1   1   3</b>	Amount <b>50.00</b>
City <b>Dublin</b>	State <b>O   H</b>	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Marilee Chinnici-Zuercher</b>			Registration Number, if PAC	
Street Address <b>6043 Glenbarr Place</b>	Employer/Occupation/Labor Organization* <b>City of Dublin/City Council</b>		M   D   Y <b>0   8   3   1   1   3</b>	Amount <b>50.00</b>
City <b>Dublin</b>	State <b>O   H</b>	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Jeffrey D Mackey</b>			Registration Number, if PAC	
Street Address <b>1538 Melrose Avenue</b>	Employer/Occupation/Labor Organization* <b>Fusco Matthews/Attorney</b>		M   D   Y <b>0   8   3   1   1   3</b>	Amount <b>50.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43224</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Matthew Ralph Mossman</b>			Registration Number, if PAC	
Street Address <b>5682 Wilcox Road</b>	Employer/Occupation/Labor Organization* <b>Mizuno/Manager</b>		M   D   Y <b>0   8   3   1   1   3</b>	Amount <b>100.00</b>
City <b>Dublin</b>	State <b>O   H</b>	Zip Code <b>43016</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Jane M Doyle</b>			Registration Number, if PAC	
Street Address <b>6874 McDougal Court</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   8   3   1   1   3</b>	Amount <b>100.00</b>
City <b>Dublin</b>	State <b>O   H</b>	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>Check</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

Total expenditures this event

Page Total \$ **450.00**