

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full					
Committee to Retain Judge Reece					
Full Name of Contributor				Registration Number, if PAC	
Eric J. Hoffman					
Street Address	Employer/Occupation/Labor	Organization*	M	D	Y
338 S. High Street			0	2	1
City	State	Zip Code	Amount		
Columbus	O H	43215	200.00		
			Form (Cash, Check, etc)		
			Check		
Full Name of Contributor				Registration Number, if PAC	
Valoria C. Hoover					
Street Address	Employer/Occupation/Labor	Organization*	M	D	Y
5972 Dunheath Loop			0	2	1
City	State	Zip Code	Amount		
Dublin	O H	43016	150.00		
			Form (Cash, Check, etc)		
			Check		
Full Name of Contributor				Registration Number, if PAC	
J. Scott Weisman Law Offices, LPA					
Street Address	Employer/Occupation/Labor	Organization*	M	D	Y
601 S. High Street			0	2	1
City	State	Zip Code	Amount		
Columbus	O H	43215	350.00		
			Form (Cash, Check, etc)		
			Check		
Full Name of Contributor				Registration Number, if PAC	
Janet E. Jackson					
Street Address	Employer/Occupation/Labor	Organization*	M	D	Y
2865 Castlewood Road			0	2	1
City	State	Zip Code	Amount		
Columbus	O H	43209	150.00		
			Form (Cash, Check, etc)		
			Check		
Full Name of Contributor				Registration Number, if PAC	
Roger M. Koeck					
Street Address	Employer/Occupation/Labor	Organization*	M	D	Y
6257 Emberwood Road			0	2	1
City	State	Zip Code	Amount		
Dublin	O H	43017	150.00		
			Form (Cash, Check, etc)		
			Check		
Full Name of Contributor				Registration Number, if PAC	
Robert F. Krapenc					
Street Address	Employer/Occupation/Labor	Organization*	M	D	Y
601 S. High Street			0	2	1
City	State	Zip Code	Amount		
Columbus	O H	43215	300.00		
			Form (Cash, Check, etc)		
			Check		
Full Name of Contributor				Registration Number, if PAC	
Joseph R. Landusky II					
Street Address	Employer/Occupation/Labor	Organization*	M	D	Y
901 S. High Street			0	2	1
City	State	Zip Code	Amount		
Columbus	O H	43206	575.00		
			Form (Cash, Check, etc)		
			Check		

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 1,875.00