| * |
|--------|
| 6/9/11 |
| 31 |
| |

Page Total S

500.00

Statement of Contributions Received at a Social or Fundraising Event

| | Prescribed by Se | cretary of State 3/05 | | | | |
|---|---|--------------------------------|--|--------------------|-----------|-------------------|
| Name of Committee in Full | | | | | | |
| David Young for Judge Committee | | | | | | |
| Full Name of Contributor | | Registration Number, if PAC | | | | |
| Timothy J. Snyder | | | | , , | | |
| Street Address | Employer/Occupation/Labor Organization* | | M D | | Amount | 400.00 |
| 173 Thurman Ave | | | 0 6 1 | | | 100.00 |
| City | State | Zip Code | Form(Cash,Che | | | |
| Columbus | <u> </u> | 43206 | Che | | • | |
| Full Name of Contributor | | | Registration Nu | ımber, if PAC | | |
| Charles D. Underwood | - In | | - - - - - - - - - | | | |
| Street Address | Employer/Occupation/Labor Organization* | | M D | | Amount . | 250.00 |
| 731 Fairway Blvd | | | | 0 6 1 4 1 1 250.00 | | |
| City | State | Zip Code | Form(Cash,Che | | | |
| Whitehall Full Name of Contributor | OIH | 43213 | Che | | | |
| | | | Registration Nu | mber, if PAC | | |
| Ira B. Sully | - In | | - | · · · · · | | |
| Street Address | Employer/Occupation/Labor Organization* | | M D | | Amount | 2= 00 |
| 844 South Front Street | | | 0 6 1 | | | 25.00 |
| Calmahaa | State | Zip Code | Form(Cash,Che | | | |
| Columbus Full Name of Contributor | <u> </u> | 43206 | Che Registration No | | | |
| | | | Registration Nu | mber, ii PAC | • | |
| Abe Bahgat Co LPA Street Address | lr 1 /0 | 7.1.0 | M I D | l Y | | |
| | Employer/Occupation/Labor Organization* | | | 1 1 | Amount | 50.00 |
| 338 S High St | · · · · · | 7:. 0. 1. | 0 6 1 Form(Cash,Che | | | 50.00 |
| Columbus | State | Zip Code | | | | |
| Columbus Full Name of Contributor | OH | 43215 | Che Registration Nu | | | |
| | | | Registration No | inder, ii PAC | • | |
| Luftman Heck and Associates, LLP Street Address | E-palayar/Osaya | ation() about Occasions in the | M D | Y | Amount | |
| 580 East Rich Street | Employer/Occupation/Labor Organization* | | 0 6 1 | | никии | 50.00 |
| City | State | Zip Code | Form(Cash,Che | | | 30.00 |
| Columbus | O H | 43215 | Che | | | |
| Full Name of Contributor | <u> </u> | 43213 | Registration Nu | | | |
| Cecily Ferris | | | Registration No | moci, n i Ac | • | |
| Street Address | Employer/Occup | ation/Labor Organization* | M D | Y | Amount . | ·· - - |
| 905 S High | Linpioyeroccup | anon taoor Organization | 0 6 1 | | Allount . | 25.00 |
| City | State | Zip Code | Form(Cash,Che | | | 20.00 |
| Columbus | OH | 43206 | Cas | - | | |
| Full Name of Contributor | 1 () (11 | 40200 | Registration Nu | | • | |
| Tail Palie of Controllor | | | Trogasaranon Tro | | , | |
| Street Address | Employer/Occup | ation/Labor Organization* | M I D | Y | Amount | |
| | | | | | | |
| City | State | Zip Code | Form(Cash,Che | ck.etc) | | |
| | 1 | , | | , | | |
| | ! | 1 | | | | |
| | | | | | | |

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 | Total expenditures this event | | |
|--------------------------------|-------------------------------|-------------------------------|--|--|
| 500.00 | 118.70 | | | |

^{*} 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)]