

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

Prescribed by Secretary of State 03/05

|   |  |                   |                                    |                    |
|---|--|-------------------|------------------------------------|--------------------|
| Name of Committee in Full<br>McKinley for Judge     |  |                   |                                    |                    |
| Full Name of Contributor<br>Christopher M. Brown    |  |                   | Registration Number, if PAC        |                    |
| Street Address<br>601 S. High Street, Floor 1       | Employer/Occupation/Labor Organization*  |                   | M   D   Y<br>0   3   2   6   1   3 | Amount<br>\$250.00 |
| City<br>Columbus                                    | State<br>OH  | Zip Code<br>43215 | Form (Cash, Check, etc.)<br>Check  |                    |
| Full Name of Contributor<br>John A. Conner, II      |  |                   | Registration Number, if PAC        |                    |
| Street Address<br>436 W. Fifth Avenue               | Employer/Occupation/Labor Organization*<br>Judge, 10th District Court of Appeals |                   | M   D   Y<br>0   3   2   7   1   3 | Amount<br>\$100.00 |
| City<br>Columbus                                    | State<br>OH  | Zip Code<br>43201 | Form (Cash, Check, etc.)<br>Check  |                    |
| Full Name of Contributor<br>Gary W. Hammond         |  |                   | Registration Number, if PAC        |                    |
| Street Address<br>556 E. Town Street                | Employer/Occupation/Labor Organization*  |                   | M   D   Y<br>0   4   0   4   1   3 | Amount<br>\$250.00 |
| City<br>Columbus                                    | State<br>OH  | Zip Code<br>43215 | Form (Cash, Check, etc.)<br>Check  |                    |
| Full Name of Contributor<br>Jennifer Brunner        |  |                   | Registration Number, if PAC        |                    |
| Street Address<br>35 North Fourth Street, Suite 200 | Employer/Occupation/Labor Organization*<br>Attorney, Brunner Quinn               |                   | M   D   Y<br>0   4   1   1   1   3 | Amount<br>\$20.00  |
| City<br>Columbus                                    | State<br>OH  | Zip Code<br>43215 | Form (Cash, Check, etc.)<br>Cash   |                    |
| Full Name of Contributor<br>Robert J. Walter        |  |                   | Registration Number, if PAC        |                    |
| Street Address<br>3040 Lane Woods Court             | Employer/Occupation/Labor Organization*  |                   | M   D   Y<br>0   4   1   1   1   3 | Amount<br>\$100.00 |
| City<br>Columbus                                    | State<br>OH  | Zip Code<br>43221 | Form (Cash, Check, etc.)<br>Check  |                    |
| Full Name of Contributor<br>Kristen J. Brown        |  |                   | Registration Number, if PAC        |                    |
| Street Address<br>1489 Oakbourne Drive              | Employer/Occupation/Labor Organization*  |                   | M   D   Y<br>0   4   1   1   1   3 | Amount<br>\$100.00 |
| City<br>Worthington                                 | State<br>OH  | Zip Code<br>43235 | Form (Cash, Check, etc.)<br>Check  |                    |
| Full Name of Contributor<br>Dennis A. Roberge       |  |                   | Registration Number, if PAC        |                    |
| Street Address<br>372 Cumberland Drive              | Employer/Occupation/Labor Organization*<br>Not employed, Retired                 |                   | M   D   Y<br>0   4   1   1   1   3 | Amount<br>\$100.00 |
| City<br>Whitehall                                   | State<br>OH  | Zip Code<br>43213 | Form (Cash, Check, etc.)<br>Check  |                    |

\* 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

Total expenditures this event.

\$0.00

\$0.00

Page Total \$ 920.00