



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

Form 31-E
R.C. 3517.10(B)

Full Name of Committee Committee to Re-elect Judge Gill				
Full Name of Contributor Carol Wright			Registration Number, if PAC	
Street Address 1022 Bruck Street		Employer/Occupation/Organization		MM/DD/YYYY 06/13/18
City Columbus		State OH	Zip Code 43206	Amount \$500.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Tim D'Angelo			Registration Number, if PAC	
Street Address 33 E. Columbus Street		Employer/Occupation/Organization		MM/DD/YYYY 06/13/18
City Columbus		State OH	Zip Code 43206	Amount \$200.00
Form: Cash, Check, etc SQUARE				
Full Name of Contributor Jessica King			Registration Number, if PAC	
Street Address 135 E. Kossuth Street		Employer/Occupation/Organization		MM/DD/YYYY 06/13/18
City Columbus		State OH	Zip Code 43206	Amount \$5.00
Form: Cash, Check, etc SQUARE				
Full Name of Contributor Eric O'Brien			Registration Number, if PAC	
Street Address 140 Hanford Street		Employer/Occupation/Organization		MM/DD/YYYY 06/13/18
City Columbus		State OH	Zip Code 43206	Amount \$200.00
Form: Cash, Check, etc SQUARE				
Full Name of Contributor Terri Webb			Registration Number, if PAC	
Street Address 4815 Stonehaven Drive		Employer/Occupation/Organization		MM/DD/YYYY 06/13/18
City Columbus		State OH	Zip Code 43220	Amount \$300.00
Form: Cash, Check, etc SQUARE				
Full Name of Contributor Pam Farber			Registration Number, if PAC	
Street Address One Miranova Pl		Employer/Occupation/Organization		MM/DD/YYYY 06/13/18
City Columbus		State OH	Zip Code 43215	Amount \$100.00
Form: Cash, Check, etc SQUARE				
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Organization		MM/DD/YYYY
City		State	Zip Code	Amount
Form: Cash, Check, etc				

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.

* connotes court appointed expert or attorney/GAL list

** relative of court employee

Total Contributions This Event

\$3950 -

Total Expenses This Event

\$0.00

Page Total: \$

1305 -