

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>McIntosh For Judge Committee</b>					
Full Name of Contributor <b>Chester, Wilcox, &amp; Saxbe</b>				Registration Number, if PAC	
Street Address <b>65 E. State St Ste 1000</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Y <b>2</b>	Amount <b>\$400.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Cynthia G. Francis</b>					
Street Address <b>3132 Retriever Rd</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43232</b>	Y <b>2</b>	Amount <b>\$50.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Dennis B. Ehrie &amp; Janet Grubb</b>					
Street Address <b>4062 Georgesville Wrightsville Rd</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43123</b>	Y <b>2</b>	Amount <b>\$50.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Dennis E. &amp; Joan M. Norris</b>					
Street Address <b>3027 Euclid Hts. Blvd</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>1</b>
City <b>Cleveland Heights</b>		State <b>OH</b>	Zip Code <b>44118</b>	Y <b>0</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Dr. William J. &amp; Ruth B. Meyers</b>					
Street Address <b>2829 Wickliffe Rd</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43221</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Eric &amp; Kristine Robbins</b>					
Street Address <b>106 Bellefield Ave</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Westerville</b>		State <b>OH</b>	Zip Code <b>43081</b>	Y <b>2</b>	Amount <b>\$100.00</b>
Form (Cash, Check, etc.) <b>Check</b>					
Full Name of Contributor <b>Friends for Thomas</b>					
Street Address <b>41 S. High St Ste 2600</b>		Employer/Occupation/Labor Organization*		M <b>1</b>	D <b>0</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Y <b>2</b>	Amount <b>\$500.00</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 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

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ 1,300.00