

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

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Re-Elect Judge Hummer				
Full Name of Contributor Vassy Law Office			Registration Number, if PAC	
Street Address 145 E. Rich St., 2nd Floor	Employer/Occupation/Labor Organization*		M D Y 0 3 1 1 1 5	Amount \$250.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor Abe Bahgat Attorney at Law			Registration Number, if PAC	
Street Address 338 S. High Street	Employer/Occupation/Labor Organization*		M D Y 0 3 1 1 1 5	Amount \$200.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor Philip F. Brown LLC			Registration Number, if PAC	
Street Address 503 South Front St., Suite 210	Employer/Occupation/Labor Organization*		M D Y 0 3 1 1 1 5	Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor Halabi Law, LLC			Registration Number, if PAC	
Street Address 88 W. Main Street	Employer/Occupation/Labor Organization*		M D Y 0 3 1 1 1 5	Amount \$150.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor Philip B. Kaufman, Esq.			Registration Number, if PAC	
Street Address 492 South High Street, Suite 200	Employer/Occupation/Labor Organization*		M D Y 0 3 1 1 1 5	Amount \$150.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor James K. Hunter III Attorney at Law			Registration Number, if PAC	
Street Address 341 S. 3rd St., Suite 300	Employer/Occupation/Labor Organization*		M D Y 0 3 1 1 1 5	Amount \$50.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor Joslyn Law Firm, LLC			Registration Number, if PAC	
Street Address 901 S. High Street	Employer/Occupation/Labor Organization*		M D Y 0 3 1 1 1 5	Amount \$100.00
City Columbus	State OH	Zip Code 43206	Form (Cash, Check, etc.) 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

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ **\$1,000.00**