

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

Prescribed by Secretary of State 03/05

Name of Committee in Full					
Gladden for Judge					
Full Name of Contributor Mango Law LLC				Registration Number, if PAC	
Street Address 5649 Van Wert Dr.		Employer/Occupation/Labor Organization* Attorney		M D Y 0 9 2 8 1 5	Amount \$50.00
City Hilliard	State OH	Zip Code 43026		Form (Cash, Check, etc.) Check	
Hastie Legal, LLC					
Street Address 1192 Grandview Ave.				Registration Number, if PAC	
Street Address 1192 Grandview Ave.		Employer/Occupation/Labor Organization* Attorney		M D Y 0 9 2 8 1 5	Amount \$50.00
City Columbus	State OH	Zip Code 43212		Form (Cash, Check, etc.) Check	
Rebecca Gooch					
Street Address 336 S. High St.				Registration Number, if PAC	
Street Address 336 S. High St.		Employer/Occupation/Labor Organization* Attorney		M D Y 0 9 2 8 1 5	Amount \$100.00
City Columbus	State OH	Zip Code 43215		Form (Cash, Check, etc.) Check	
Peter J. Binning					
Street Address 592 S. Third St.				Registration Number, if PAC	
Street Address 592 S. Third St.		Employer/Occupation/Labor Organization* Attorney		M D Y 0 9 2 8 1 5	Amount \$100.00
City Columbus	State OH	Zip Code 43215		Form (Cash, Check, etc.) Check	
Bonnie Fox					
Street Address 233 N. Bend Rd.				Registration Number, if PAC	
Street Address 233 N. Bend Rd.		Employer/Occupation/Labor Organization* Retired		M D Y 0 9 2 8 1 5	Amount \$200.00
City Pataskala	State OH	Zip Code 43062		Form (Cash, Check, etc.) Check	
Luftman, Heck & Associates, LLP					
Street Address 580 E. Rich St.				Registration Number, if PAC	
Street Address 580 E. Rich St.		Employer/Occupation/Labor Organization* Attorney		M D Y 0 9 2 8 1 5	Amount \$200.00
City Columbus	State OH	Zip Code 43215		Form (Cash, Check, etc.) Check	
Street Address				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M D Y	Amount
City	State	Zip Code		Form (Cash, Check, etc.)	
	OH				

* 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
\$2,750.00

Total expenditures this event
0.00

Page Total \$ **700.00**