

RONALD E. PLYMALE
F.C. COMMON PLEAS COURT JUDGE GENERAL
AMENDED 2010 - PRE-GENERAL

Event Date 9/23/10

Page 1

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

Prescribed by Secretary of State 03/05

10 DEC 22 PM 3:49

Name of Committee in Full				FRANKLIN COUNTY BOARD OF ELECTIONS			
Committee to Elect Ronald Plymale Judge				Registration Number, if PAC			
Full Name of Contributor Michelle McKinney				Amount			
Street Address 3750 Rutledge Drive		Employer/Occupation/Labor Organization* Food & Bev. Server		M	D	Y	
City Hillard		State OH	Zip Code 43026	0	9	2	3
Form (Cash, Check, etc.) Money Order				1	0		
Full Name of Contributor Phillip B. Kaufman				Amount			
Street Address 1979 Haverton Dr		Employer/Occupation/Labor Organization* LPA		M	D	Y	
City Reynoldsburg		State OH	Zip Code 43068	0	9	2	3
Form (Cash, Check, etc.) Cash				1	0		
Full Name of Contributor Porterwright Law Firm				Amount			
Street Address 41 South High Street		Employer/Occupation/Labor Organization* LPA		M	D	Y	
City Columbus		State OH	Zip Code 43215	0	9	2	4
Form (Cash, Check, etc.) Check				1	0		
Full Name of Contributor Dianne L. Kiener				Amount			
Street Address 846 Summit Street		Employer/Occupation/Labor Organization* Retired		M	D	Y	
City Columbus		State OH	Zip Code 43215	0	9	2	3
Form (Cash, Check, etc.) Check				1	0		
Full Name of Contributor Adam Leonatti				Amount			
Street Address 1311 W. 2nd Avenue		Employer/Occupation/Labor Organization* LPA		M	D	Y	
City Grandview		State OH	Zip Code 43212	0	9	2	3
Form (Cash, Check, etc.) Check				1	0		
Full Name of Contributor				Amount			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	
City		State OH	Zip Code				
Form (Cash, Check, etc.)							
Full Name of Contributor				Amount			
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	
City		State OH	Zip Code				
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

Total contributions this event

Total expenditures this event.

\$1,278.00

\$30.00

Page Total \$ 1,278.00