

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full White for Judge Committee									
Full Name of Contributor Hans A. Schell					Registration Number, if PAC				
Street Address 5940 N. High St.			Employer/Occupation/Labor Organization*		M	D	Y	Amount	
					0	5	1	8	0
City Worthington			State O	H	Zip Code 43085		Form(Cash, Check, etc) check		
					50.00				
Full Name of Contributor Charles F. Jones					Registration Number, if PAC				
Street Address 189 Farmwood Place			Employer/Occupation/Labor Organization*		M	D	Y	Amount	
					0	5	1	7	0
City Gahanna			State O	H	Zip Code 43230		Form(Cash, Check, etc) check		
					100.00				
Full Name of Contributor Will H. Perry					Registration Number, if PAC				
Street Address 1144 Matterhorn Dr.			Employer/Occupation/Labor Organization*		M	D	Y	Amount	
					0	5	1	6	0
City Reynoldsburg			State O	H	Zip Code 43068		Form(Cash, Check, etc) check		
					50.00				
Full Name of Contributor David Grant					Registration Number, if PAC				
Street Address 6869 Meadow Glen Dr. S.			Employer/Occupation/Labor Organization*		M	D	Y	Amount	
					0	5	1	6	0
City Westerville			State O	H	Zip Code 43082		Form(Cash, Check, etc) check		
					100.00				
Full Name of Contributor Richard P. Courter					Registration Number, if PAC				
Street Address 1072 Hillsdale Dr.			Employer/Occupation/Labor Organization*		M	D	Y	Amount	
					0	5	1	0	0
City Columbus			State O	H	Zip Code 43224		Form(Cash, Check, etc) check		
					100.00				
Full Name of Contributor Reuben Harris Jr.					Registration Number, if PAC				
Street Address 27801 Euclid Ave., Ste. 110			Employer/Occupation/Labor Organization*		M	D	Y	Amount	
					0	5	1	6	0
City Euclid			State O	H	Zip Code 44132		Form(Cash, Check, etc) check		
					20.00				
Full Name of Contributor William V. Jackson					Registration Number, if PAC				
Street Address 1272 Stone Ridge Ct			Employer/Occupation/Labor Organization*		M	D	Y	Amount	
					0	5	0	9	0
City Westerville			State O	H	Zip Code 43081		Form(Cash, Check, etc) check		
					100.00				

* 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 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

Page Total \$ 520.00