Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date	4/9/15
Page 22	

Page Total \$

ame of Committee in Full		····							
Glaeden for Judge			Degister	ion Nur	nher if	PAC			
Full Name of Contributor Frost Todd Brown LLC				Registration Number, if PAC OH783					
treet Address 301 E. Fourth St., Suite 3300	Employer/Occupat	1 ! !	0 9	1 5		unt 500.00			
ity Cincinnati	Stal te OH	Zip Code 45202	Form (Ca Check					2.1	
Full Name of Contributor Stephen Smith			Registra	tion Nu	mber, ii				
treet Address 10 W. Broad St.	Employer/Occupat Attorney	1 1	0 9			200.00			
Sity Columbus	Stal te OH	Zip Code 43215	Checi	Form (Cash, Check, etc.) Check Registration Number, if PAC				1	
Full Name of Contributor Zeiger, Tigges & Little LLP				יא חסניי	ा ज		ount		
Street Address 41 S. High St., Suite 3500		tion/Labor Organization*	1 " 1 1 1			5 \$	250.00		
City Columbus	State OH	Zip Code 43215	Chec					•	
Full Name of Contributor Bradley P. Koffel, LLC				יא מסתב	ਸ਼ਾਹਦਾ, - 1 ਯ		ount		
Street Address 1801 Watermark Dr., Suite 350	Employer/Occupation/Labor Organization*		0 4			5	\$1,000.00		
City Columbus	Stal te OH	Zip Code 43215	Chec					· · ·	
Full Name of Contributor Priya Tamilarasan			Registi	ration N		, , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·		
Street Address 34 W. Whittier St.	Employer/Occup	Employer/Occupation/Labor Organization*		0 9		5	100.00		
City Columbus	Sta' te OH	Zip Code 43205	Form (Cash, Check, etc.) Check Registration Number, if PAC				4		
Full Name of Contributor			Regist	ration N	umber				
Street Address	Employer/Occup	ation/Laber Organization*	M	D	Y	Ar	nount		
City	Stal te OH	Zip Code	Form (Cash, Check, etc.)			ac.)		,	
Full Name of Contributor			Regis	tration 1	lumber	r, if PAC			
Street Address	Employer/Occup	pation/Labor Organization*	MDY		Y A	mount			
City	Stal te OH	Zip Code	Form (Cash, Check, etc.)			etc.)			

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.	
	[
\$6.475.00	\$806.38	

labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]