



Statement of Contributions Received Form 31-A ORC 3517.10

Full Name of Committee							
Committee to Re-elect Judge Gill							
						tration Number, if PAC	
Vicki McCory							
Street Address	Employer/Occupation/Organization					Form (Cash, Check, etc.)	
5348 Princeton Ln						PAYPAL	
City	State		Zip Code	M/D/Y		Amount	
Grove City			43125	06/12/1	8	\$50.00	
						tration Number, if PAC	
Victory's Fundraiser							
Street Address	Employer/Occupation/Organization					Form (Cash, Check, etc.)	
City	State		Zip Code	M/D/Y	***************************************	Amount	
			i	06/13/1	8	\$3,950.00	
Full Name of Contributor						tration Number, if PAC	
Donald Gorman					Ť		
Street Address	Employe	r/Occ	upation/Orgo	nization		Form (Cash, Check, etc.)	
319 Morgan Lane						PAYPAL	
City	State		Zip Code	M/D/Y		Amount	
Gahanna	OH		43230	06/13/1	8	\$200.00	
Full Name of Contributor			*			tration Number, if PAC	
Pamela Makowski							
Street Address	Employer/Occupation/Organization					Form (Cash, Check, etc.)	
555 S. Third St.						PAYPAL	
City	State		Zip Code	M/D/Y		Amount	
Columbus			43215	06/13/1	8	\$50.00	
						tration Number, if PAC	
New Albany Fundraiser							
Street Address	Employe	r/Occ	upation/Orga			Form (Cash, Check, etc.)	
City	State		Zip Code	M/D/Y	_	Amount	
				06/14/1		\$ 3,775.00	
						tration Number, if PAC	
Buck & Fish							
Street Address	Employer/Occupation/Organization					Form (Cash, Check, etc.)	
3380 Tremont Road, Ste 110						CHECK	
City	State		Zip Code	M/D/Y	_	Amount	
Columbus	ОН		43221	06/18/1		\$100.00	
Full Name of Contributor Registration Number, if						tration Number, if PAC	
Robert Mann					<u> </u>		
Street Address	Employer/Occupation/Organization					Form (Cash, Check, etc.)	
3614 Bainbridge Mills Drive	CHECK						
City	State		Zip Code	M/D/Y	_	Amount	
Powell	OH 43065 06/18/18					\$600.00	
l						tration Number, if PAC	
Jeffrey McClelland							
Street Address	Employer/Occupation/Organization					Form (Cash, Check, etc.)	
2595 Brentwood Road						CHECK	
City	State		Zip Code	M/D/Y	•	Amount	
Columbus	OH		43209	06/18/1	8	\$25.00	

*Required for contributions from individuals over \$100 to statewide and general assembly candidates. If co	ntributor 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 a	ggregate of \$100, the labor organization of which the employees are members, if any, must also
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than employer should be listed. If two or more employees contribute via payroll deduction and exc appear. [R.C. 3517.10(B)(4)]

* Connotes court appointed expert or attorney/GAL list

** Relative of court employee