



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee The Committee to Re-Elect Judge McIntosh				
Full Name of Contributor Guy L. Reece II			Registration Number, if PAC	
Street Address 7191 Keystone Ranch Ct.	Employer/Occupation/Labor Organization* Franklin County		Form (Cash, Check, etc.) Check	
City Blacklick	State OH	Zip Code 43004	Date (MM/DD/YYYY) 01/31/2018	Amount \$200.00
Full Name of Contributor Stephen & Katherine Wolfe			Registration Number, if PAC	
Street Address 1350 W. 5th Ave., Ste 330	Employer/Occupation/Labor Organization* Wolfe Law Group, LLC		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 01/31/2018	Amount \$250.00
Full Name of Contributor Larry James			Registration Number, if PAC	
Street Address 500 S. Front St., Ste 330	Employer/Occupation/Labor Organization* Crabbe, Brown & James		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 01/31/2015	Amount \$500.00
Full Name of Contributor David H. Thomas			Registration Number, if PAC	
Street Address 3010 Shadywood Rd.	Employer/Occupation/Labor Organization* Taft, Stettinus & Hollister		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 01/31/2018	Amount \$500.00
Full Name of Contributor Stanley B. Dritz			Registration Number, if PAC	
Street Address 400 S. 5th Street, Ste 303	Employer/Occupation/Labor Organization* Self-employed		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 01/31/2018	Amount \$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 also appear. [R.C. 3517.10(B)(4)]