

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

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Re-Elect Judge Hummer					
Full Name of Contributor Richanne M. Zymkoski				Registration Number, if PAC	
Street Address 2128 Poplar St.	Employer/Occupation/Labor Organization*		M 0	D 3	Y 1115
City Columbus	State OH	Zip Code 43207	Form (Cash, Check, etc.) Check		Amount \$50.00
Full Name of Contributor Christopher M. Brown Law Offices LLC				Registration Number, if PAC	
Street Address 601 S. High St., Floor 1	Employer/Occupation/Labor Organization*		M 0	D 3	Y 1115
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check		Amount \$150.00
Full Name of Contributor Alyson C. Tanenbaum				Registration Number, if PAC	
Street Address 5598 Picayune St.	Employer/Occupation/Labor Organization*		M 0	D 3	Y 1115
City Columbus	State OH	Zip Code 43221	Form (Cash, Check, etc.) Check		Amount \$100.00
Full Name of Contributor J. Harris Leshner Attorney at Law				Registration Number, if PAC	
Street Address 336 S. High Street	Employer/Occupation/Labor Organization*		M 0	D 3	Y 1115
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check		Amount \$250.00
Full Name of Contributor Jeffrey T. Stavroff				Registration Number, if PAC	
Street Address 250 Daniel Burnham Sq., Unit 307	Employer/Occupation/Labor Organization*		M 0	D 3	Y 1115
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) Check		Amount \$100.00
Full Name of Contributor Committee for Judge Schneider				Registration Number, if PAC	
Street Address 865 Macon Alley	Employer/Occupation/Labor Organization*		M 0	D 3	Y 1115
City Columbus	State OH	Zip Code 43206	Form (Cash, Check, etc.) Check		Amount \$200.00
Full Name of Contributor John W. Keeling				Registration Number, if PAC	
Street Address 679 Overbrook Dr.	Employer/Occupation/Labor Organization*		M 0	D 3	Y 1115
City Columbus	State OH	Zip Code 43214	Form (Cash, Check, etc.) Check		Amount \$50.00

\* 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)]

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

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ 900.00