Event Date	6/6/13
Page	29

Statement of Contributions Received at a Social or Fundraising Event

	rrescribed by Seci	retary of State 3/05					
Name of Committee in Full							
Gwen Callender for Judge			D	inc 37	10 m s	<u> </u>	_
Full Name of Contributor			Registration Number, if PAC				
Mark Gillis/Rich & Gillis Law Group, I	LLC	tion(I abos Oransississes	М	D	Y	Amount	
Street Address		tion/Labor Organization*	о 14			CHROWII	50.00
6400 Riverside Drive, Suite D		loved/Attorney		2 4			JU.UU
City		Zip Code	Form(Cash, Check, etc)				
<u>Dublin</u>	$O \mid H$	O H 43017		Check Registration Number, if PAC			
Full Name of Contributor	I.C		registra	uon Numi	uct, II PA		
Jeffrey Rich/Rich & Gillis Law Group I	LLL	tion() abor Otooriestics *	М	l d	ΙΥ	Amount	
Street Address		nion/Labor Organization*		2 4	-		50.00
6400 Riverside Drive, Suite D		loyed/Attorney		2 4 ish,Check			JU.UU
City D. 1.11		Zip Code 42017		check Check			
Dublin	$O \mid H \mid$	43017		Cneck		C	
Full Name of Contributor			Acgistra.	uon Num	υει, II PA	·	!
Allan C Krulak	r_1	sing the Constitution	М	D	Y	Amount	
Street Address		tion/Labor Organization*	0 4		$\begin{vmatrix} 1 \\ 1 \end{vmatrix} 3$		150.00
2436 Suffolk Lane		ity Enterprise/VP		214_ash,Check			120.00
City D. D. D.	State	Zip Code					
Pepper Pike	OH	44124		Check		·C	
Full Name of Contributor			registra	AUN NUM	oci, li PA	10	
Michael H Keenan	Te_de	tion() abor Oran-in-tin-*	м	D	ΙΥ	Amount	
Street Address		Employer/Occupation/Labor Organization*		1			100.00
7103 Coventry Woods Drive		Agency/Insurance		0 8 ash,Check			100.00
City	State	Zip Code 42017					
	$O \mid H$	43017		Checl		\C	
Full Name of Contributor			vegistra	MON NUM	oci, ii Př		
William O Mulbarger	Ir1:2	siand shar Oressia site *	M	T D	ΙΥ	Amount	
Street Address		Employer/Occupation/Labor Organization*		213			100.00
801 Katherines Ridge Lane		du Cons./CEO		1213 ash Check			100.00
City	State	Zip Code					
Columbus	OIH	43235		Chec		\C	
Full Name of Contributor			VcS1201.9	mon temp	, II F <i>f</i>	170	
William S Matthews II	r1- 10	uion/Labor Orașe	М	D	Ιv	Amount	
Street Address	1	ation/Labor Organization*		1 -	1112		100.00
8385 Ridgeview Drive		Matthews/Atty _		0 5			100.00
City	State	Zip Code	,	•			
<u>Cincinnati</u>	$O \mid H$	45215	_	Chec) C	
Full Name of Contributor			L'egistra	addi Nur.	oci, ii Pi		
Employer/Occupation/Labor Organization* M D Y Amount							
Street Address	Employer/Occupa	Employer/Occupation/Labor Organization* Dublin Springs/Office Mar					100.00
5247 Reddington Drive			Form/C	ash,Checl	1 1 1 3		100.00
City	State	Zip Code		Chec.			
Dublin	<u>0 H</u>	43017	<u> </u>	<u>cnec</u>			

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

Total contributions this event	Total expenditures this event	Page Total \$650.00_
		<u> </u>

[•] 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)]