

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 The Maher Law Firm, LLC				Registration Number, if PAC	
Street Address 7599 Forest Knoll Dr.		Employer/Occupation/Labor Organization*		M 0	D 4
City Dublin		State OH	Zip Code 43017	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Douglas A. Funkhouser				Registration Number, if PAC	
Street Address 1560 Vanelm St.		Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus		State OH	Zip Code 43228	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Laura N. Nesbitt				Registration Number, if PAC	
Street Address 2657 Amberwick Pl.		Employer/Occupation/Labor Organization*		M 0	D 4
City Hilliard		State OH	Zip Code 43026	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Luftman, Heck & Associates, LLP				Registration Number, if PAC	
Street Address 580 East Rich Street		Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus		State OH	Zip Code 43215	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Joslyn Law Firm, LLC				Registration Number, if PAC	
Street Address 901 S. High St.		Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus		State OH	Zip Code 43206	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor E. Scott Shaw				Registration Number, if PAC	
Street Address 500 S. Front St., Suite 130		Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus		State OH	Zip Code 43215	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Jeremy Dodion Attorney at Law Co., LPA				Registration Number, if PAC	
Street Address 1188 South High Street		Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus		State OH	Zip Code 43206	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					

* 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 \$ 700.00