

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

Prescribed by Secretary of State 03/05

Name of Committee in Full The Committee to Re-Elect Judge McIntosh					
Full Name of Contributor Linda Leah Reibel				Registration Number, if PAC	
Street Address 39 Orchard Drive		Employer/Occupation/Labor Organization*		M 1	D 0
City Worthington		State OH	Zip Code 43085	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Brett L. Miller				Registration Number, if PAC	
Street Address 38 E. Mithoff Street		Employer/Occupation/Labor Organization*		M 1	D 0
City Columbus		State OH	Zip Code 43206	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Matt Sauer				Registration Number, if PAC	
Street Address 117 S. Harding Rd.		Employer/Occupation/Labor Organization*		M 1	D 0
City Columbus		State OH	Zip Code 43209	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Thomas J. Bonasera				Registration Number, if PAC	
Street Address 245 John H. McConnell Blvd.		Employer/Occupation/Labor Organization*		M 1	D 0
City Columbus		State OH	Zip Code 43215	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Isabella Dixon				Registration Number, if PAC	
Street Address 277 Murphys Green Drive		Employer/Occupation/Labor Organization*		M 1	D 0
City Powell		State OH	Zip Code 43065	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Corey V. Crognale				Registration Number, if PAC	
Street Address 1052 Arcaro Drive		Employer/Occupation/Labor Organization*		M 1	D 0
City Gahanna		State OH	Zip Code 43230	Y 2	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Richard Parsons				Registration Number, if PAC	
Street Address 65 E. State Street, Ste. 200		Employer/Occupation/Labor Organization*		M 1	D 0
City Columbus		State OH	Zip Code 43205	Y 2	Amount \$200.00
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 \$ **\$800.00**