

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>MAS For JUDGE</u>			
Full Name of Contributor <u>Tracy J. KEMP</u>		Registration Number, if PAC	
Street Address <u>218 Sanbridge Circle</u>	Employer/Occupation/Labor Organization*	M   D   Y <u>10   19   07</u>	Amount <u>45<sup>00</sup>/<sub>xx</sub></u>
City <u>Worthington</u>	State <u>OH</u> Zip Code <u>43085</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Norajill Pasos Sanchez</u>		Registration Number, if PAC	
Street Address <u>4551 Emerald Lks Blvd</u>	Employer/Occupation/Labor Organization*	M   D   Y <u>10   19   07</u>	Amount <u>25<sup>00</sup>/<sub>xx</sub></u>
City <u>Powell</u>	State <u>OH</u> Zip Code <u>43065</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Edward C. Spiker</u>		Registration Number, if PAC	
Street Address <u>1791 Glenn Ave</u>	Employer/Occupation/Labor Organization*	M   D   Y <u>10   19   07</u>	Amount <u>75<sup>00</sup>/<sub>xx</sub></u>
City <u>Cols</u>	State <u>OH</u> Zip Code <u>43212</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>J. Michael Houlahan</u>		Registration Number, if PAC	
Street Address <u>6774 Lakeside Cr. W.</u>	Employer/Occupation/Labor Organization*	M   D   Y <u>10   19   07</u>	Amount <u>50<sup>00</sup>/<sub>xx</sub></u>
City <u>Worthington</u>	State <u>OH</u> Zip Code <u>43085</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Jeanine Michael</u>		Registration Number, if PAC	
Street Address <u>7719 Richens Dr</u>	Employer/Occupation/Labor Organization*	M   D   Y <u>10   19   07</u>	Amount <u>25<sup>00</sup>/<sub>xx</sub></u>
City <u>Dublin</u>	State <u>OH</u> Zip Code <u>43017</u>	Form (Cash, Check, etc.) <u>check</u>	
Full Name of Contributor <u>Lucretia S. Pollard</u>		Registration Number, if PAC	
Street Address <u>446 Haymore Ave N</u>	Employer/Occupation/Labor Organization*	M   D   Y <u>10   19   07</u>	Amount <u>45<sup>00</sup>/<sub>xx</sub></u>
City <u>Worthington</u>	State <u>OH</u> Zip Code <u>43085</u>	Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>William H. Woods</u>		Registration Number, if PAC	
Street Address <u>1022 Blind Brook Dr</u>	Employer/Occupation/Labor Organization*	M   D   Y <u>10   19   07</u>	Amount <u>45<sup>00</sup>/<sub>xx</sub></u>
City <u>Cds</u>	State <u>OH</u> Zip Code <u>43235</u>	Form (Cash, Check, etc.) <u>Check</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 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

765.00

Total expenditures this event.

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310.00  
Page Total \$ \$0.00