Carroll

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## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05 Name of Committee in Full Gwen Callender for Judge Registration Number, if PAC Full Name of Contributor Kay E Cremeans Employer/Occupation/Labor Organization\* D Amount Street Address 0 4 0 6 1 3 200.00 FOP/OLC Inc/Attorney 5699 Saint Paul Road Form(Cash,Check,etc) Zip Code City  $O \mid H$ 43103 Check Ashville Registration Number, if PAC Full Name of Contributor Russell Carnahan/Hunter, Carnahan, Shoub & Byard Amount D Employer/Occupation/Labor Organization\* 200.00 0|4|0|6|1|3 3360 Tremont Road, 2nd Floor Self-employed/Attorney Form(Cash,Check,etc) Zip Code City 43221 Check | H Columbus Registration Number, if PAC Full Name of Contributor Michael S Weinman Employer/Occupation/Labor Organization\* Street Address 200.00 0 4 0 6 FOP of OH/Legislative Ag 505 Springs Drive Form(Cash,Check,etc) Zip Code  $O \mid H$ Check 43214 Columbus Registration Number, if PAC Committee to Elect Robert Goheen Amount Employer/Occupation/Labor Organization\* 4.99 0 | 4 | 0 | 6 | 1 3 2750 Township Road 155 Zip Code Form(Cash,Check,etc) State City 43315 Check Cardington Registration Number, if PAC Full Name of Contributor Robert L Goheen Amount Employer/Occupation/Labor Organization\* 0|4|0|6|1|3 250.00 FOP/OCC 2750 Township Road 155 Form(Cash,Check,etc) Zip Code City Check 43315 Cardington Registration Number, if PAC Full Name of Contributor Tara Crawford D Amount Employer/Occupation/Labor Organization\* Street Address 0 4 0 6 1 3 300.00 FOP/Paralegal 180 Woodsview Drive Form(Cash,Check,etc) Zip Code State 43110 Check Canal Winchester Registration Number, if PAC Full Name of Contributor Linda K Fielv Đ Amount Employer/Occupation/Labor Organization\* 300.00 0 4 0 6 1 3 OEA/Attorney\_ 6785 Winchester Road Form(Cash,Check,etc) Zip Code State City

Fill in the boxes below only on the last page for this event.	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	•
in the date column.	

Total contributions this even	Total expenditures this event	Page Total \$ 1,454.99
		<u> </u>

43112

Check

<sup>\*</sup> 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)]