

Event Date	04/12/2018	Page	4

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

Form 31-E R.C. 3517.10(B)

				·	<del></del>
Full Name of Committee					
Re-Elect Judge Terri Jamison					
Full Name of Contributor				Registration Number, if PAC	
Treneff Cozza Law				-	
Street Address	Employer	/Occupat	ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
155 Commerce Park Drive, Suite 5	Treneff	Cozza	Law/Attorney	04/12/2018	\$300.00
City	-	State	Zip Code	Form (Cash, Check, Etc	
Westerville	•	ОН	43082	Check	
Full Name of Contributor			<u> </u>	Registration Number, if PAC	
Lisa Meier - The Law Office of Anthony Gre	СО				·
Street Address	Employer	/Occupat	ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
2039 Coleman Rd	The Lav	w Office	e of Anthony Greco	04/12/2018	\$300.00
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43235	Check	
Full Name of Contributor		Registration Number, if PAC			
Ronald R. Petroff					
Street Address	Employer	/Occupat	ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
4120 Croan Rd	Petroff	Petroff Law Offices/Managing Par		04/12/2018	\$250.00
City	1	State	Zip Code	Form (Cash, Check, Etc	1 2 2
New Albany		ОН	43054	Check	and the same of th
Full Name of Contributor		Registration Number, if PAC			
Michael McCord					
Street Address	Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
811 Strawberry Hill Rd. West			04/12/2018	\$100.00	
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43213	Cash	
Full Name of Contributor				Registration Number, if PAC	
Contributor of \$25.00 or Less					
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount	
 				04/12/2018	\$10.00
City	:	State	Zip Code	Form (Cash, Check, Etc	2775.7
		OH 、	1	Cash	***********
* Required for contributions from individuals over \$100	to statewid	lo and Go	noral Assembly candida	tes If contributor is self-employe	d the occupation and the

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
\$5,685.00	

Total	Expenditures	This	Event

<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 also appear. [R.C. 3517.10(B)(4)]