



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

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

Full Name of Committee Committee to Re-elect Judge Gill				
Full Name of Contributor David Fishman			Registration Number, if PAC	
Street Address 4891 Bylington Lane		Employer/Occupation/Organization		MM/DD/YYYY 06/14/18
City New Albany		State OH	Zip Code 43054	Amount \$100.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Michelle Coleman			Registration Number, if PAC	
Street Address 7641 Fenway Blvd		Employer/Occupation/Organization		MM/DD/YYYY 06/14/18
City New Albany		State OH	Zip Code 43054	Amount \$100.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Charles Cash			Registration Number, if PAC	
Street Address 5012 Cadogan Pl		Employer/Occupation/Organization		MM/DD/YYYY 06/14/18
City New Albany		State OH	Zip Code 43054	Amount \$100.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Threadwell Clothiers LLC			Registration Number, if PAC	
Street Address 6958 New Albany Road		Employer/Occupation/Organization		MM/DD/YYYY 06/14/18
City New Albany		State OH	Zip Code 43054	Amount \$50.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Ric Daniell			Registration Number, if PAC	
Street Address		Employer/Occupation/Organization		MM/DD/YYYY 06/14/18
City		State OH	Zip Code	Amount \$150.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Marjorie Slagle			Registration Number, if PAC	
Street Address PO Box 532		Employer/Occupation/Organization		MM/DD/YYYY 06/14/18
City Fayetteville		State AR	Zip Code 72702	Amount \$125.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Dmitriy Borshchak			Registration Number, if PAC	
Street Address 414 W. 1st Street		Employer/Occupation/Organization		MM/DD/YYYY 06/14/18
City Columbus		State OH	Zip Code 43201	Amount \$125.00
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.

* connotes court appointed expert or attorney/GAL list

** relative of court employee

Total Contributions This Event \$3775-	Total Expenses This Event \$0.00	Page Total: \$ 750-
--	--	----------------------------