

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

Prescribed by Secretary of State 03/05

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|---|---|--------------------------|---|---------------------------|
| Name of Committee in Full Glaeden for Judge | | | | |
| Full Name of Contributor Brian Barker | | | Registration Number, if PAC | |
| Street Address 1698 Berkshire Rd. | Employer/Occupation/Labor Organization* Real Estate | | M 1 D 0 Y 0 | Amount \$150.00 |
| City Columbus | State OH | Zip Code 43221 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor Lisa Diemer | | | Registration Number, if PAC | |
| Street Address 3040 Riverside Dr., Ste. 209 | Employer/Occupation/Labor Organization* | | M 1 D 0 Y 0 | Amount \$50.00 |
| City Columbus | State OH | Zip Code 43221 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor Donald Brey | | | Registration Number, if PAC | |
| Street Address 1280 Camolot Dr. | Employer/Occupation/Labor Organization* | | M 1 D 0 Y 0 | Amount \$100.00 |
| City Upper Arlington | State OH | Zip Code 43220 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor Lisa Williams | | | Registration Number, if PAC | |
| Street Address 4051 Longhill Rd. | Employer/Occupation/Labor Organization* | | M 1 D 0 Y 0 | Amount \$100.00 |
| City Columbus | State OH | Zip Code 43220 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor Wade Steen | | | Registration Number, if PAC | |
| Street Address 2500 Sherwin Rd. | Employer/Occupation/Labor Organization* | | M 1 D 0 Y 0 | Amount \$100.00 |
| City Columbus | State OH | Zip Code 43221 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor Amanda Markoff | | | Registration Number, if PAC | |
| Street Address 2320 Plover Ct. | Employer/Occupation/Labor Organization* | | M 1 D 0 Y 0 | Amount \$100.00 |
| City Columbus | State OH | Zip Code 43228 | Form (Cash, Check, etc.) Check | |
| Full Name of Contributor Carol Brand | | | Registration Number, if PAC | |
| Street Address 1658 Andover Rd. | Employer/Occupation/Labor Organization* | | M 1 D 0 Y 0 | Amount \$100.00 |
| City Columbus | State OH | Zip Code 43212 | 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

\$3,565.00

Total expenditures this event.

0.00

Page Total \$ **\$700.00**