

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>The Committee to Re-Elect Judge McIntosh</b>					
Full Name of Contributor <b>Rebecca Gooch</b>				Registration Number, if PAC	
Street Address <b>336 S. High St.</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>1   0   2   3   1   2</b>	Amount <b>\$200.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Victoria Powers</b>				Registration Number, if PAC	
Street Address <b>291 S. Cassingham Rd.</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>1   0   3   0   1   2</b>	Amount <b>\$250.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43209</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Felix Wade</b>				Registration Number, if PAC	
Street Address <b>778 Hawksbury Way</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>1   0   2   3   1   2</b>	Amount <b>\$250.00</b>
City <b>Powell</b>		State <b>OH</b>	Zip Code <b>43065</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Robert Weisman</b>				Registration Number, if PAC	
Street Address <b>7277 Pennyroyal Rd.</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>1   0   3   0   1   2</b>	Amount <b>\$250.00</b>
City <b>Dublin</b>		State <b>OH</b>	Zip Code	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Michael Jordan</b>				Registration Number, if PAC	
Street Address <b>6816 Bishops Wood</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>1   0   3   0   1   2</b>	Amount <b>\$250.00</b>
City <b>New Albany</b>		State <b>OH</b>	Zip Code <b>43054</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Don McTigue</b>				Registration Number, if PAC	
Street Address <b>545 E. Town Street</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>1   0   3   0   1   2</b>	Amount <b>\$200.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>George M. Sarap</b>				Registration Number, if PAC	
Street Address <b>51 N. High Street, Suite 781</b>		Employer/Occupation/Labor Organization*		M   D   Y <b>1   0   3   0   1   2</b>	Amount <b>\$150.00</b>
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Check</b>	

\* 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

**\$9,625.00**

Total expenditures this event.

**\$389.46**

Page Total \$ **\$1,550.00**