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

Event Date	7/6/06	
Page 6		_

Name of Committee in Full McIntosh For Judge Committee					
Full Name of Contributor Philip B. Kaufman, Esq.			Registration Number, if PAC		
Street Address 341 S. 3rd St, Ste. 300	Employer/Occup	ation/Labor Organization*	M D Y Amount \$150.00		
City Columbus	Sta te OH	Zip Code 43215	Form (Cash, Check, etc.) Check		
Full Name of Contributor Portman, Foley & Flint LLP			Registration Number, if PAC		
Street Address 471 E. Broad St, Ste. 1820	Employer/Occup	ation/Labor Organization*	M D Y Amount \$250.00		
City Columbus	Sta te OH	Zip Code 43215	Form (Cash, Check, etc.) Check		
Full Name of Contributor Harry R. Reinhart			Registration Number, if PAC		
Street Address 400 S. 5th St, Ste. 202	Reinha	ation/Labor Organization* rt Law Office	0 7 0 8 0 6 \$100.00		
City Columbus	Stalte OH	Zip Code 43215	Form (Cash, Check, etc.) Check		
Full Name of Contributor Richard A. Talbott			Registration Number, if PAC		
Street Address 4236 Shire Cove Rd	Employer/Occupation/Labor Organization*		0 7 0 6 0 6 \$500.00		
City Hilliard	Sta te OH	Zip Code 43026	Form (Cash, Check, etc.) Check		
Full Name of Contributor S. Weinberg	· · · · · · · · · · · · · · · · · · ·		Registration Number, if PAC		
Street Address 3440 Olentangy River Rd #13F	Employer/Occupation/Labor Organization*		0 7 0 6 0 6 \$150.00		
City Columbus	OH	Zip Code 43202	Form (Cash, Check, etc.) Check		
Full Name of Contributor Samual B. Weiner CO., LPA			Registration Number, if PAC		
Street Address 743 S. Front St		ation/Labor Organization*	0 6 2 1 0 6 \$100.00		
City Columbus	OH,	Zip Code 43206	Check		
Full Name of Contributor Schottenstein Zox & Dunn Co. LPA Street Address			Registration Number, if PAC		
250 West St	Employer/Occup	ation/Labor Organization*	M D Y Amount \$500.00		
City Columbus	OH Stay te	43215	Form (Cash, Check, etc.) Check		

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 No. 31-E" and list the date of the event in the date column

Total contributions this event	Total expenditures this event.		
\$0.00	\$0.00	Page Total \$	\$1,750.00

^{*} 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)]