

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Hummer for Judge Committee					
Full Name of Contributor Alice A. Goodburn				Registration Number, if PAC	
Street Address 222 Brevoort Rd.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 1
City Columbus	State O	Zip Code 43214	Amount 50.00	Form(Cash,Check,etc) Check	
Full Name of Contributor Kristin Farrell-Logsdon				Registration Number, if PAC	
Street Address 572 Melrose Ave.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 1
City Columbus	State O	Zip Code 43202	Amount 50.00	Form(Cash,Check,etc) Check	
Full Name of Contributor Linda J. Hummer				Registration Number, if PAC	
Street Address 101 Northridge Rd.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 1
City Columbus	State O	Zip Code 43214	Amount 50.00	Form(Cash,Check,etc) Check	
Full Name of Contributor Stephen L. Walker				Registration Number, if PAC	
Street Address 247 Piedmont Rd.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 1
City Columbus	State O	Zip Code 43214	Amount 100.00	Form(Cash,Check,etc) Check	
Full Name of Contributor Mary Clare Bauer				Registration Number, if PAC	
Street Address 1798 Ridgeview Rd.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 1
City Upper Arlington	State O	Zip Code 43221	Amount 100.00	Form(Cash,Check,etc) Check	
Full Name of Contributor Kathy Levering				Registration Number, if PAC	
Street Address 3333 Parksley Ct.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 1
City Columbus	State O	Zip Code 43204	Amount 100.00	Form(Cash,Check,etc) Check	
Full Name of Contributor Frank T. Gill				Registration Number, if PAC	
Street Address 4204 Lawnview Dr.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 1
City Columbus	State O	Zip Code 43214	Amount 100.00	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 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

Total expenditures this event

Page Total \$ 550.00