

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full David Young for Judge Committee					
Full Name of Contributor The Law Office of Spater & Davis-Williams LLC				Registration Number, if PAC	
Street Address 1188 S High St	Employer/Occupation/Labor Organization*		M 0	D 4	Y 1
City Columbus	State O	Zip Code 43206	Form(Cash,Check,etc) Check		Amount 25.00
Full Name of Contributor Edward R Forman				Registration Number, if PAC	
Street Address 2653 Glen Echo Dr	Employer/Occupation/Labor Organization*		M 0	D 4	Y 1
City Columbus	State O	Zip Code 43202	Form(Cash,Check,etc) Check		Amount 50.00
Full Name of Contributor William H Nesbitt				Registration Number, if PAC	
Street Address 2657 Amberwick Pl	Employer/Occupation/Labor Organization*		M 0	D 4	Y 1
City Hilliard	State O	Zip Code 43026	Form(Cash,Check,etc) Check		Amount 50.00
Full Name of Contributor Sheryl K Munson				Registration Number, if PAC	
Street Address 3700 Rivervail Dr	Employer/Occupation/Labor Organization*		M 0	D 4	Y 1
City Columbus	State O	Zip Code 43221	Form(Cash,Check,etc) Check		Amount 50.00
Full Name of Contributor Teresa L Edwards				Registration Number, if PAC	
Street Address 5611 Belle Oak Dr	Employer/Occupation/Labor Organization*		M 0	D 4	Y 1
City Galloway	State O	Zip Code 43119	Form(Cash,Check,etc) Check		Amount 50.00
Full Name of Contributor Edward A Szczypinski				Registration Number, if PAC	
Street Address 78 E Chestnut St, Apt 406	Employer/Occupation/Labor Organization*		M 0	D 4	Y 1
City Columbus	State O	Zip Code 43215	Form(Cash,Check,etc) Check		Amount 50.00
Full Name of Contributor Thomas R Waldeck				Registration Number, if PAC	
Street Address 1027 Peggys Cove	Employer/Occupation/Labor Organization*		M 0	D 4	Y 1
City Reynoldsburg	State O	Zip Code 43068	Form(Cash,Check,etc) Check		Amount 50.00

* 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 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 \$ 325.00