

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Committee To Elect Judge Maynard</b>							
Full Name of Contributor <b>Rebecca Gooch</b>				Registration Number, if PAC			
Street Address <b>4878 Berry Leaf Pl</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	50.00
City <b>Hilliard</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43206</b>	Form(Cash, Check, etc) <b>Check</b>			
Full Name of Contributor <b>Tannisha D. Bell</b>				Registration Number, if PAC			
Street Address <b>617 Worthington Forest Pl</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	25.00
City <b>Columbus</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43229</b>	Form(Cash, Check, etc) <b>Check</b>			
Full Name of Contributor <b>Mark Collins</b>				Registration Number, if PAC			
Street Address <b>673 Mohawk Street Suite 202</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	50.00
City <b>Columbus</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43206</b>	Form(Cash, Check, etc) <b>Check</b>			
Full Name of Contributor <b>Janet Jackson</b>				Registration Number, if PAC			
Street Address <b>2865 Castlewood Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	100.00
City <b>Columbus</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43209</b>	Form(Cash, Check, etc) <b>Check</b>			
Full Name of Contributor <b>W. James Sika</b>				Registration Number, if PAC			
Street Address <b>1681 Laramie Drive</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	25.00
City <b>Powell</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43065</b>	Form(Cash, Check, etc) <b>Check</b>			
Full Name of Contributor <b>George Georgeff</b>				Registration Number, if PAC			
Street Address <b>107 Granville Street</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	75.00
City <b>Gahanna</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43230</b>	Form(Cash, Check, etc) <b>Check</b>			
Full Name of Contributor <b>E. Dennis Muchnicki</b>				Registration Number, if PAC			
Street Address <b>270 Glover Street</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				1	0	2	75.00
City <b>Dublin</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43017</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 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 \$ 400.00