

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

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>David Young For Judge Committee</b>					
Full Name of Contributor <b>Seana S. Ferris</b>				Registration Number, if PAC	
Street Address <b>3941 Fairlington Drive</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>	Y <b>30</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43220</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>250.00</b>
Full Name of Contributor <b>Anne M. Crawford</b>				Registration Number, if PAC	
Street Address <b>2295 Concorde Village Drive</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>	Y <b>30</b>
City <b>Columbus</b>	State <b>Oh</b>	Zip Code <b>43220</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Bernard A. Ostrowski</b>				Registration Number, if PAC	
Street Address <b>7262 Rosegate Place</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>	Y <b>30</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>500.00</b>
Full Name of Contributor <b>Fred Shoemaker</b>				Registration Number, if PAC	
Street Address <b>5500 Ulry Road</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>	Y <b>30</b>
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>200.00</b>
Full Name of Contributor <b>Joe Kelly</b>				Registration Number, if PAC	
Street Address <b>111 West Street</b>	Employer/Occupation/Labor Organization* <b>Kelly Law Office LLC</b>		M <b>0</b>	D <b>9</b>	Y <b>30</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Mark Backus</b>				Registration Number, if PAC	
Street Address <b>7653 Belise Court</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>	Y <b>30</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>Cash</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Bob Backus</b>				Registration Number, if PAC	
Street Address <b>7653 Belise Court</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>9</b>	Y <b>30</b>
City <b>Dublin</b>	State <b>OH</b>	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>Cash</b>		Amount <b>100.00</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

1,810.00

Total expenditures this event

483.59

Page Total \$ 1,350.00