

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

Prescribed by Secretary of State 03/05

Name of Committee in Full McIntosh For Judge Committee					
Full Name of Contributor Jeffrey M. & M. Michelle Lewis				Registration Number, if PAC	
Street Address 4314 Reed Rd		Employer/Occupation/Labor Organization*		M 1	D 0
City Columbus		State OH	Zip Code 43220	Y 3	Amount \$500.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Jennifer Cordle & Jennifer Howell					
Street Address 298 Blenheim Rd		Employer/Occupation/Labor Organization*		M 1	D 0
City Columbus		State OH	Zip Code 43214	Y 3	Amount \$40.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Jerry & Gayle Saunders					
Street Address 2788 Floribunda Dr		Employer/Occupation/Labor Organization*		M 0	D 9
City Columbus		State OH	Zip Code 43209	Y 2	Amount \$50.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor John D. Moore					
Street Address 7918 Slate Ridge Blvd		Employer/Occupation/Labor Organization*		M 1	D 0
City Reynoldsburg		State OH	Zip Code 43068	Y 2	Amount \$325.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor John J. Mackinnon					
Street Address 501 S. High St		Employer/Occupation/Labor Organization*		M 1	D 0
City Columbus		State OH	Zip Code 43215	Y 3	Amount \$100.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor John Parmis					
Street Address 6910 Cunningham Dr		Employer/Occupation/Labor Organization*		M 1	D 0
City New Albany		State OH	Zip Code 43054	Y 2	Amount \$50.00
Form (Cash, Check, etc.) Check					
Full Name of Contributor Julia Fox					
Street Address 2616 Wexford Rd		Employer/Occupation/Labor Organization*		M 1	D 0
City Columbus		State OH	Zip Code 43221	Y 2	Amount \$500.00
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 also 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

\$0.00

Total expenditures this event.

\$0.00

Page Total \$ **\$1,565.00**