

31-E

R.C. 3517.10(B)

Event Date 2/4/16

Page 1

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

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Elect Kline for Judge					
Full Name of Contributor Vassy Law Office				Registration Number, if PAC	
Street Address 145 E Rich St, 2nd Floor		Employer/Occupation/Labor Organization*		M 0	D 2
City Columbus		State OH	Zip Code 43215	Y 0	Amount \$100.00
Full Name of Contributor John A Yaklevich				Registration Number, if PAC	
Street Address 100 E Main St		Employer/Occupation/Labor Organization*		M 0	D 2
City Columbus		State OH	Zip Code 43215	Y 0	Amount \$1,000.00
Full Name of Contributor Robert G Fais Attorney at Law				Registration Number, if PAC	
Street Address 6650 Wynwright Dr		Employer/Occupation/Labor Organization*		M 0	D 2
City Dublin		State OH	Zip Code 43016	Y 0	Amount \$100.00
Full Name of Contributor C. Edward Heckert, Jr.				Registration Number, if PAC	
Street Address 65 Gateside Pl, SE		Employer/Occupation/Labor Organization*		M 0	D 2
City Marietta		State GA	Zip Code 30067	Y 0	Amount \$100.00
Full Name of Contributor Bonnie A Vangeloff				Registration Number, if PAC	
Street Address 215 Landover Rd		Employer/Occupation/Labor Organization*		M 0	D 2
City Gahanna		State OH	Zip Code 43230	Y 0	Amount \$100.00
Full Name of Contributor Joshua D. Atkin				Registration Number, if PAC	
Street Address 7431 Rossmore Ct		Employer/Occupation/Labor Organization*		M 0	D 2
City Washington Township		State OH	Zip Code 45459	Y 0	Amount \$100.00
Full Name of Contributor Christopher & Jennifer Clark				Registration Number, if PAC	
Street Address 845 Thornapple Grv		Employer/Occupation/Labor Organization*		M 0	D 2
City Galloway		State OH	Zip Code 43119	Y 0	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 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

Total expenditures this event.

\$2,820.00

\$223.58

Page Total \$ **\$1,550.00**