



Statement of Contributions Received

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Form 31-A
ORC 3517.10

Full Name of Committee Committee to elect George W. Leach Judge				
Full Name of Contributor Y. On Main L.L.C.			Registration Number, if PAC	
Street Address 139 E. Main St., Ste 103		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 09/10/2017	Amount \$1,000.00
Full Name of Contributor Kathryn Culver			Registration Number, if PAC	
Street Address 363 Horton Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Akron	State OH	Zip Code 44312	Date (MM/DD/YYYY) 09/11/2017	Amount \$250.00
Full Name of Contributor Y. On Main, L.L.C.			Registration Number, if PAC	
Street Address 139 E. Main St., Ste 103		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 09/19/2017	Amount \$1,000.00
Full Name of Contributor Eugene Weiss L.L.C.			Registration Number, if PAC	
Street Address 536 S. 3rd St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 10/11/2017	Amount \$150.00
Full Name of Contributor Dickinson Wright L.L.C. (for Kathryn Wood) → 3 people on one check			Registration Number, if PAC	
Street Address 150 E. Gay St., 24th Fl.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 09/25/2017	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)]

Page Total **\$2,450.00**