

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full					
Committee to Retain Judge Reece					
Full Name of Contributor				Registration Number, if PAC	
Tyack, Blackmore, Liston & Nigh Co., LPA					
Street Address		Employer/Occupation/Labor Organization*		M	D
536 South High Street				0	2
City		State		Y	Amount
Columbus		O H		1	150.00
		Zip Code		2	
		43215		3	
				Form(Cash, Check, etc)	
				Check	
Full Name of Contributor					
Keith A. Yeazel					
Street Address				Registration Number, if PAC	
5354 North High Street					
City		State		M	D
Columbus		O H		0	2
		Zip Code		Y	Amount
		43214		1	150.00
				2	
				Form(Cash, Check, etc)	
				Check	
Full Name of Contributor					
John H. Bates					
Street Address				Registration Number, if PAC	
495 S. High Street, Suite 400					
City		State		M	D
Columbus		O H		0	3
		Zip Code		Y	Amount
		43215		0	150.00
				8	
				Form(Cash, Check, etc)	
				Check	
Full Name of Contributor					
Benesch, Friedlander, Coplan & Aronoff LLP					
Street Address				Registration Number, if PAC	
41 South High Street, Suite 2600					
City		State		M	D
Columbus		O H		0	3
		Zip Code		Y	Amount
		43215		0	500.00
				6	
				Form(Cash, Check, etc)	
				Check	
Full Name of Contributor					
Sarah Creedon					
Street Address				Registration Number, if PAC	
2087 Kentwell Road					
City		State		M	D
Upper Arlington		O H		0	3
		Zip Code		Y	Amount
		43221		0	100.00
				6	
				Form(Cash, Check, etc)	
				Check	
Full Name of Contributor					
Troy Doucet					
Street Address				Registration Number, if PAC	
4200 Regent Street, Suite 200					
City		State		M	D
Columbus		O H		0	3
		Zip Code		Y	Amount
		43219		1	150.00
				2	
				Form(Cash, Check, etc)	
				Check	
Full Name of Contributor					
Jeffrey A. Berndt					
Street Address				Registration Number, if PAC	
575 S. High Street					
City		State		M	D
Columbus		O H		0	4
		Zip Code		Y	Amount
		43215		0	200.00
				3	
				Form(Cash, Check, etc)	
				Check	

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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

17,325.00

Total expenditures this event

Page Total \$ 1,400.00