

Event Date: 02/01/2018 Page: **3** 

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

Form 31-E R.C. 3517.10(B)

Full Name of Committee						
Committee to Re-elect Judg	ge Gill					
Full Name of Contributor	Registration Number, if PAC					
Jacqueline Baumann	Jacqueline Baumann					
Street Address		Empl	oyer/Occupation/Organization	MM/DD/YYYY	Amount	
1108 Euclaire Ave; Apt A				02/01/18	\$50.00	
City	State		Zip Code	Form: Cash, Check, etc		
Columbus	ОН		43209	CHECK		
Full Name of Contributor	Registration Number, if PAC					
Blythe M. Bethel *						
Street Address		Empl	oyer/Occupation/Organization	MM/DD/YYYY	Amount	
250 Civic Center Drive, Ste	600	į		02/01/18	\$600.00	
City	State		Zip Code	Form: Cash, Check, etc		
Columbus	OH		43215	CHECK		
Full Name of Contributor				Registration Number,	if PAC	
Daniel Binau						
Street Address		Empl	oyer/Occupation/Organization	MM/DD/YYYY	Amount	
37 West Broad Street, Suite	950	ļ		02/01/18	\$150.00	
City	State		Zip Code	Form: Cash, Check, etc		
Columbus	ОН		43215	CHECK		
Full Name of Contributor		Registration Number, if PAC				
Dmitriy Borshchak *						
Street Address		Empl	oyer/Occupation/Organization	MM/DD/YYYY	Amount	
1650 Lake Shore Drive, Suite 150				02/01/18	\$300.00	
City	State		Zip Code	Form: Cash, Check, etc		
Columbus	OH		43201	CHECK		
Full Name of Contributor		Registration Number, if PAC				
Lisa Bracco						
Street Address		Empl	oyer/Occupation/Organization	MM/DD/YYYY	Amount	
3535 Henderson Road				02/01/18	\$100.00	
City	State		Zip Code	Form: Cash, Check, etc		
Columbus	ОН		43220	CHECK		
Full Name of Contributor				Registration Number, if PAC		
John Brown						
Street Address		Empl	oyer/Occupation/Organization	MM/DD/YYYY	Amount	
2245 Summit				02/01/18	\$100.00	
City	State		Zip Code	Form: Cash, Check, etc		
Columbus	ОН		43202	CHECK		
Full Name of Contributor	Registration Number,	if PAC				
Jeff Brown						
Street Address		Empl	oyer/Occupation/Organization	MM/DD/YYYY	Amount	
580 S. High Street, Ste 200		<u> </u>		02/01/18	\$150.00	
City	State		Zip Code	Form: Cash, Check, etc		
Columbus	ОН		43215	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.

*	connotes	court	appointed	expert o	or attorney	/GAL	list

\*\* relative of court employee

Total Contributions This Event	Total Expenses This Event	1250
[		Page Total: \$ / 300