

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 Re-Elect Judge Hummer					
Full Name of Contributor Cloppert, Latanick, Sauter & Washburn				Registration Number, if PAC	
Street Address 225 East Broad Street		Employer/Occupation/Labor Organization*		M 0	D 6
City Columbus		State OH	Zip Code 43215	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) Check	
Full Name of Contributor Philip B. Kaufman					
Street Address 492 South High Street, Suite 200		Employer/Occupation/Labor Organization*		M 0	D 6
City Columbus		State OH	Zip Code 43215	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) Check	
Full Name of Contributor Plevin & Gallucci LLC Columbus					
Street Address 2291 Scioto Harper Dr.		Employer/Occupation/Labor Organization*		M 0	D 6
City Columbus		State OH	Zip Code 43204	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) Check	
Full Name of Contributor CPM Law PAC					
Street Address 366 East Broad Street		Employer/Occupation/Labor Organization*		M 0	D 6
City Columbus		State OH	Zip Code 43215	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) Check	
Full Name of Contributor Abe Bahgat					
Street Address 338 S. High St.		Employer/Occupation/Labor Organization*		M 0	D 6
City Columbus		State OH	Zip Code 43215	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) Check	
Full Name of Contributor Bradley Frick and Associates					
Street Address 1265 Neil Ave.		Employer/Occupation/Labor Organization*		M 0	D 6
City Columbus		State OH	Zip Code 43201	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) Check	
Full Name of Contributor James P. Simpson					
Street Address 1888 Ridgeview Rd.		Employer/Occupation/Labor Organization*		M 0	D 6
City Columbus		State OH	Zip Code 43221	Y 1	Amount \$75.00
				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 \$ 675.00