31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Committee to Elect Michael Bivens for Judge							
Full Name of Contributor						**Registration Number, if PAC**	
Jackie Mann							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
3635 Kirkwood Rd.	unemployed						credit card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43227	06	09	10		20.10
Full Name of Contributor						**Registration Number, if PAC**	
Nicole Carmichael							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
12105 Brookston Rd.	unemployed						credit card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Cincinnati	OH	45240	06	09	10		10.00
Full Name of Contributor						**Registration Number, if PAC**	
Joy Marshall							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
2745 Scottwood Rd.	Law Office of Joy Marshall						credit card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43209	06	09	10		20.10
Full Name of Contributor						**Registration Number, if PAC**	
Kim Caine							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
12643 Wheaton St.	Keller Williams						credit card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Pickerington	OH	43147	06	09	10		20.10
Full Name of Contributor						**Registration Number, if PAC**	
Lindsey Jones							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
6220 Stornway Dr.	Strayer University						credit card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43213	06	08	10		100.00
Full Name of Contributor						**Registration Number, if PAC**	
Faith Cobb							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
518 Heathshire Dr.	minister						credit card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Toledo	OH	43607	06	11	10		10.00
Full Name of Contributor						**Registration Number, if PAC**	
Joy Marshall							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
2745 Scottwood Rd.	Law Office of Joy Marshall						credit card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43209	07	13	10		25.00
Full Name of Contributor						**Registration Number, if PAC**	
Christopher Burke							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
117 Canterbury Ln. SW	Charisma Design Studios						credit card
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Reynoldsburg	OH	43068	07	13	10		39.00

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total $ 244.30