

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Thomas Hayes for Judge Committee					
Full Name of Contributor Dan Sabol: Luftman, Heck & Assoc.				Registration Number, if PAC .	
Street Address 580 E. Rich St.	Employer/Occupation/Labor Organization*		M 1	D 0	Y 14
City Columbus	State OH	Zip Code 43215	Form(Cash,Check,etc) Check		Amount 75.00
Full Name of Contributor Cassidy Calkins				Registration Number, if PAC	
Street Address 4333 Reed Rd.	Employer/Occupation/Labor Organization*		M 1	D 0	Y 14
City Columbus	State OH	Zip Code 43220	Form(Cash,Check,etc) Cash		Amount 50.00
Full Name of Contributor Phillip Churchill				Registration Number, if PAC	
Street Address 12341 Monkey Hollow Rd.	Employer/Occupation/Labor Organization*		M 1	D 0	Y 14
City Sunbury	State OH	Zip Code 43074	Form(Cash,Check,etc) Cash		Amount 20.00
Full Name of Contributor Don Shartzter				Registration Number, if PAC	
Street Address 587 E. Royal Forest Blvd.	Employer/Occupation/Labor Organization*		M 1	D 0	Y 14
City Columbus	State OH	Zip Code 43214	Form(Cash,Check,etc) Cash		Amount 50.00
Full Name of Contributor Jeff Bassnett				Registration Number, if PAC	
Street Address 282 Woodland Ave.	Employer/Occupation/Labor Organization*		M 1	D 0	Y 14
City Columbus	State OH	Zip Code 43203	Form(Cash,Check,etc) Cash		Amount 100.00
Full Name of Contributor Larry Riehl				Registration Number, if PAC	
Street Address 500 S. Front St.	Employer/Occupation/Labor Organization*		M 1	D 0	Y 14
City Columbus	State OH	Zip Code 43215	Form(Cash,Check,etc) Cash		Amount 100.00
Full Name of Contributor Richard Chambers				Registration Number, if PAC	
Street Address 2413 Sanford Dr.	Employer/Occupation/Labor Organization*		M 1	D 0	Y 14
City Columbus	State OH	Zip Code 43235	Form(Cash,Check,etc) Cash		Amount 20.00

* 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)]

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

2455.00

Total expenditures this event

0.00

Page Total \$ **415.00**