

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>SENATOR FOR JUDGE</u>				
Full Name of Contributor <u>Stephanie Thompson</u>			Registration Number, if PAC	
Street Address <u>3136 CARSTONE way</u>	Employer/Occupation/Labor Organization* <u>Army</u>		M <u>03</u> D <u>31</u> Y <u>16</u>	Amount <u>100⁰⁰</u>
City <u>Colts</u>	State <u>OH</u>	Zip Code <u>43221</u>	Form (Cash, Check, etc.) <u>100⁰⁰</u>	
Full Name of Contributor <u>MEGAN GRANT</u>			Registration Number, if PAC	
Street Address <u>1118 LAKE PL.</u>	Employer/Occupation/Labor Organization* <u>Army</u>		M <u>03</u> D <u>31</u> Y <u>16</u>	Amount <u>100⁰⁰</u>
City <u>WESTERVILLE</u>	State <u>OH</u>	Zip Code <u>43082</u>	Form (Cash, Check, etc.) <u>100⁰⁰</u>	
Full Name of Contributor <u>SEAN Boyle</u>			Registration Number, if PAC	
Street Address <u>336 S. High St</u>	Employer/Occupation/Labor Organization* <u>Army</u>		M <u>03</u> D <u>31</u> Y <u>16</u>	Amount <u>100⁰⁰</u>
City <u>Colts</u>	State <u>OH</u>	Zip Code <u>43215</u>	Form (Cash, Check, etc.) <u>100⁰⁰</u>	
Full Name of Contributor <u>Curry Roxy Mulvey LLC</u>			Registration Number, if PAC	
Street Address <u>30 NORTHWOODS BLVD</u>	Employer/Occupation/Labor Organization* <u>LAW FIRM</u>		M <u>03</u> D <u>31</u> Y <u>16</u>	Amount <u>500⁰⁰</u>
City <u>Colts</u>	State <u>OH</u>	Zip Code <u>43235</u>	Form (Cash, Check, etc.) <u>500⁰⁰</u>	
Full Name of Contributor <u>JOE MAS</u>			Registration Number, if PAC	
Street Address <u>330 S. High St</u>	Employer/Occupation/Labor Organization* <u>Army</u>		M <u>03</u> D <u>31</u> Y <u>16</u>	Amount <u>100⁰⁰</u>
City <u>Colts</u>	State <u>OH</u>	Zip Code <u>43215</u>	Form (Cash, Check, etc.) <u>100⁰⁰</u>	
Full Name of Contributor <u>LARRY LEVINSON</u>			Registration Number, if PAC	
Street Address <u>44 77 ACKERLY FARMS RD</u>	Employer/Occupation/Labor Organization* <u>Army</u>		M <u>03</u> D <u>31</u> Y <u>16</u>	Amount <u>50⁰⁰</u>
City <u>New Albany</u>	State <u>OH</u>	Zip Code <u>43054</u>	Form (Cash, Check, etc.) <u>50⁰⁰</u>	
Full Name of Contributor <u>Joseph StreB</u>			Registration Number, if PAC	
Street Address <u>736 Neil Ave</u>	Employer/Occupation/Labor Organization* <u>Army</u>		M <u>03</u> D <u>31</u> Y <u>16</u>	Amount <u>100⁰⁰</u>
City <u>Colts</u>	State <u>OH</u>	Zip Code <u>43215</u>	Form (Cash, Check, etc.) <u>100⁰⁰</u>	

* 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

--	--

Total expenditures this event.

--	--

Page Total \$ 1050