

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full David Young for Judge Committee					
Full Name of Contributor J. Scott Weisman				Registration Number, if PAC	
Street Address 601 S. High St	Employer/Occupation/Labor Organization*		M 0	D 1	Y 12
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc) Check		Amount 100.00
Full Name of Contributor Abe Bahgat				Registration Number, if PAC	
Street Address 338 S. High St	Employer/Occupation/Labor Organization*		M 0	D 1	Y 12
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc) Check		Amount 75.00
Full Name of Contributor Dominic Mango				Registration Number, if PAC	
Street Address 5649 Van Wert Drive	Employer/Occupation/Labor Organization*		M 0	D 1	Y 12
City Hilliard	State OH	Zip Code 43026	Form (Cash, Check, etc) Check		Amount 75.00
Full Name of Contributor George S. Breitmayer, III				Registration Number, if PAC	
Street Address 133 E. Livingston Ave	Employer/Occupation/Labor Organization* Ross & Midian, LLC		M 0	D 1	Y 12
City Columbus	State OH	Zip Code 43206	Form (Cash, Check, etc) Check		Amount 50.00
Full Name of Contributor Jeremy Dodgion				Registration Number, if PAC	
Street Address 1188 S. High St	Employer/Occupation/Labor Organization*		M 0	D 1	Y 12
City Columbus	State OH	Zip Code 43206	Form (Cash, Check, etc) Check		Amount 50.00
Full Name of Contributor Teresa Edwards				Registration Number, if PAC	
Street Address PO box 126	Employer/Occupation/Labor Organization*		M 0	D 1	Y 12
City Galloway	State OH	Zip Code 43119	Form (Cash, Check, etc) Check		Amount 50.00
Full Name of Contributor 12 Contributions \$25.00				Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M 0	D 1	Y 12
City	State OH	Zip Code	Form (Cash, Check, etc) Check		Amount 300.00

* 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

Total expenditures this event

Page Total \$ 700.00