

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>David Young For Judge Committee</b>					
Full Name of Contributor <b>Ira B. Sully</b>				Registration Number, if PAC	
Street Address <b>844 South Front Street</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>25.00</b>
Full Name of Contributor <b>Timothy Snyder</b>				Registration Number, if PAC	
Street Address <b>173 Thurman Ave.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Abe Bahgat</b>				Registration Number, if PAC	
Street Address <b>338 S. High Street</b>	Employer/Occupation/Labor Organization* <b>Abe Bahgat Co. LPA</b>		M <b>0</b>	D <b>6</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>Charles D. Underwood</b>				Registration Number, if PAC	
Street Address <b>731 Fairway Blvd.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>6</b>	Y <b>11</b>
City <b>Whitehall</b>	State <b>OH</b>	Zip Code <b>43213</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>250.00</b>
Full Name of Contributor <b>Dan Sabol</b>				Registration Number, if PAC	
Street Address <b>580 E. Rich</b>	Employer/Occupation/Labor Organization* <b>Luftman Heck &amp; Assoc. LL</b>		M <b>0</b>	D <b>6</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>50.00</b>
Full Name of Contributor <b>Cecily Ferris</b>				Registration Number, if PAC	
Street Address <b>905 S. High</b>	Employer/Occupation/Labor Organization* <b>Attorney</b>		M <b>0</b>	D <b>6</b>	Y <b>11</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc)		Amount <b>25.00</b>
Full Name of Contributor				Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M	D	Y
City	State	Zip Code	Form(Cash,Check,etc)		Amount

\* 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

500.00

Total expenditures this event

118.70

Page Total \$ 500.00