



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

Form 31-E
R.C. 3517.10(B)

Full Name of Committee Committee to Re-elect Judge Gill				
Full Name of Contributor Robert Hoag			Registration Number, if PAC	
Street Address 1427 Roxbury Road		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43212	Amount \$200.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Arnold L. Jack			Registration Number, if PAC	
Street Address 572 E. Rich Street		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43215	Amount \$100.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor John Johnson			Registration Number, if PAC	
Street Address 501 S. High Street		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43215	Amount \$150.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Kemp, Schaeffer & Rowe Co., LPA			Registration Number, if PAC	
Street Address 88 W. Mound Street		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43215	Amount \$300.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Kenneth Kline *			Registration Number, if PAC	
Street Address 973 N. 6 th Street		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43201	Amount \$150.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor William Lamkin, Van Eman, Trimble & Dougherty, LLC			Registration Number, if PAC	
Street Address 500 S. Front St., Suite 200		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43215	Amount \$150.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Law Offices of Anthony W. Greco, LPA			Registration Number, if PAC	
Street Address 6810-12 Caine Rd		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43235	Amount \$2,000.00
Form: Cash, Check, etc CHECK				

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.

* connotes court appointed expert or attorney/GAL list

** relative of court employee

Total Contributions This Event	Total Expenses This Event	Page Total: \$ 3050
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