Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date	9/5/07	
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Name of Committee in Full		
David Tyack for Judge Committee		
Full Name of Contributor		Registration Number, if PAC
William S. Ireland		
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
1188 South High St.	Self/Attorney	0 9 0 5 0 7 \$250.00
City	State Zip Code	Form (Cash, Check, etc.)
Columbus	OH 43206	check
Full Name of Contributor		Registration Number, if PAC
William M. Midian		
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
523 1/2 South Fifth St.		0 9 0 5 0 7 \$50.00
City	State Zip Code	Form (Cash, Check, etc.)
Columbus	OH 43206	Registration Number if PAC
Full Name of Contributor		Registration Number, if PAC
Jeffrey A. Grossman		M D Y Amount
Street Address	Employer/Occupation/Labor Organization* Grossman law Offices Co.	M D Y Amount 0 9 0 5 0 7 \$250.00
2696 Fair Ave.		Form (Cash, Check, etc.)
Columbus	State Zip Code OH 43209	check
Columbus Full Name of Contributor	VII 40200	Registration Number, if PAC
Full Name of Contributor Michael J. Holbrook		
	Eurolawas/Dogunation/Labor Department and	M D Y Amount
Street Address 982 North 6th St.	Employer/Occupation/Labor Organization*	0 9 0 5 0 7 \$100.00
Gity	Sta te Zip Code	Form (Cash, Check, etc.)
Columbus	OH 43201	check
Full Name of Contributor		Registration Number, if PAC
Ryan M. Scott		
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount
115 West Main St.		0 9 0 5 0 7 \$100.00
City	State Zip Code	Form (Cash, Check, etc.)
Columbus	OH 43215	
Full Name of Contributor		Registration Number, if PAC
Jo E. Kaiser		M IN W
Street Address 2103 Scenic Dr.	Employer/Occupation/Labor Organization*	0 9 0 5 0 7 \$100.00
		Form (Cash, Check, etc.)
City Lancaster	Stal te Zip Code OH 43130	check
	OH TOTAL	Registration Number, if PAC
Full Name of Contributor Jon Saia		
Street Address	M D Y Amount	
713 South Front St.	Employer/Occupation/Labor Organization* Saia & Piatt, P.L.L.	0 9 0 5 0 7 \$250.00
City	State Zip Code	Form (Cash, Check, etc.)
Columbus	OH 43206	check
	\$100 to statewide and General Assembly candidates. If contribut	or is self-employed, the occupation and the name of

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				
	\$6,300.00			
	ΨΟ,ΘΟΟΙΟ	1		

Total expenditures this event.

\$639.34

\$1,100.00 Page Total \$

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)]