



Statement of Contributions Received

Form 31-A
ORC 3517.10

Full Name of Committee Committee to Elect McCaughan for Judge				
Full Name of Contributor Callie Query			Registration Number, if PAC	
Street Address 1000 Urlin Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) MC
City Columbus	State OH	Zip Code 43212	Date (MM/DD/YYYY) 04/25/2018	Amount \$100.00
Full Name of Contributor Mary Gadd			Registration Number, if PAC	
Street Address 2368 Limestone Way		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) MC
City Columbus	State OH	Zip Code 43228	Date (MM/DD/YYYY) 04/25/2018	Amount \$25.00
Full Name of Contributor Marty Anderson			Registration Number, if PAC	
Street Address 3409 River Seine St		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Visa
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 04/24/2018	Amount \$150.00
Full Name of Contributor Denise St Clair			Registration Number, if PAC	
Street Address 6603 Bricegrove Blvd		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) MC
City Canal Winchester	State OH	Zip Code 43110	Date (MM/DD/YYYY) 04/24/2018	Amount \$25.00
Full Name of Contributor Anne Taylor			Registration Number, if PAC	
Street Address 7688 Camminare Dr		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) MC
City Sarasota	State FL	Zip Code 34238	Date (MM/DD/YYYY) 04/24/2018	Amount \$100.00

*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 also appear. [R.C. 3517.10(B)(4)]