31-E R.C. 3517.10(B)

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

Event Date	1/28/13
Page 2	

	Prescribed by Secret	ary of State 03/05	
Name of Committee in Full Elect Jamison for Judge			
Full Name of Contributor			Registration Number, if PAC
Vincent Dugan, Jr.			
Street Address 923 E. Broad Street	Employer/Occupation/Labor Organization*		M D Y Amount 0 1 2 8 1 3 \$250.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43206	check ,
Full Name of Contributor Robert Krapenc			Registration Number, if PAC
Street Address 601 S. High Street, 1st Floor	Employer/Occupation/Labor Organization*		0 1 2 8 1 3 \$250.00
City	Stal te	Zip Code	Form (Cash, Check, etc.)
Columbus Full Name of Contributor	OH	43215	check Control of the
Bradley Frick & Associates			Registration Number, if PAC
Street Address 1265 Neil Ave		ation/Labor Organization*	0 1 2 8 1 3 Amount \$250.00
Calvantura	Stal te	Zip Code	Form (Cash, Check, etc.)
Columbus Full Name of Contributor	OH	43201	check
Tyack, Blackmore, Liston & Nigh			Registration Number, if PAC
Street Address 536 S. High Street	Employer/Occupation/Labor Organization*		M D Y Amount 0 1 2 8 1 3 \$250.00
City Columbus	Stal te	Zip Code	Form (Cash, Check, etc.)
Full Name of Contributor Eugene Battisti, Jr.	OH	43215	Check Registration Number, if PAC
Street Address 15 E. Kossuth St		ation/Labor Organization*	0 1 2 8 1 3 Amount \$250.00
City Columbus	Stal te OH	Zip Code 43206	Form (Cash, Check, etc.) check
Full Name of Contributor Blythe Bethel			Registration Number, if PAC
Street Address 495 S. High Street, Suite 220	Employer/Occup.	ation/Labor Organization*	0 1 2 8 1 3 Amount \$150.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) check
Full Name of Contributor John P. Johnson			Registration Number, if PAC
Street Address 501 S. High Street	Employer/Occup	ation/Labor Organization*	0 1 2 8 1 3 Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) check
* Required for contributions from individuals over \$10 the individual's business, if any, rather than employers labor organization of which the employees are manufactured.	should be listed. If two or more	e employees contribute via pay	

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.	
	ı,	\neg
	Page Total \$ 1,500.0	0

labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]