31-E
R.C. 3517.10(B)

Event Date 4/11/08
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Dingus For Judge			CAMELOT CELLARS					
Full Name of Contributor				Registration Number, if PAC				
Steve Dunn								
Street Address	Employer/Occupation/Labor Organization*			M	D	Y	Amount	
1728 Peardale Rd	Starbucks			04	11	08	50.00	
City	State	Zip Code		Form(Cash,Check,etc)				
Columbus	OH	43229		Cash				
Full Name of Contributor				Registration Number, if PAC				
Dustin Hamilton								
Street Address	Employer/Occupation/Labor Organization*			M	D	Y	Amount	
4545 Lakeside St., Apt E				04	11	08	50.00	
City	State	Zip Code		Form(Cash,Check,etc)				
Columbus	OH	43233		Cash				
Full Name of Contributor				Registration Number, if PAC				
Chris Metzger								
Street Address	Employer/Occupation/Labor Organization*			M	D	Y	Amount	
5482 Beresford St.				04	11	08	50.00	
City	State	Zip Code		Form(Cash,Check,etc)				
Canal Winchester	OH	43110		Check				
Full Name of Contributor				Registration Number, if PAC				
Ron Jenkins								
Street Address	Employer/Occupation/Labor Organization*			M	D	Y	Amount	
832 Thurber Dr., Apt 7				04	11	08	50.00	
City	State	Zip Code		Form(Cash,Check,etc)				
Columbus	OH	43215		Check				
Full Name of Contributor				Registration Number, if PAC				
Andrew Grego								
Street Address	Employer/Occupation/Labor Organization*			M	D	Y	Amount	
5837 Harrow Glen Ct.				04	11	08	50.00	
City	State	Zip Code		Form(Cash,Check,etc)				
Galena	OH	43021		Check				
Full Name of Contributor				Registration Number, if PAC				
James Moser								
Street Address	Employer/Occupation/Labor Organization*			M	D	Y	Amount	
5837 Harrow Glen Ct.				04	11	08	50.00	
City	State	Zip Code		Form(Cash,Check,etc)				
Galena	OH	43021		Check				
Full Name of Contributor				Registration Number, if PAC				
Ian Calvert								
Street Address	Employer/Occupation/Labor Organization*			M	D	Y	Amount	
31 Thurman Ave				04	11	08	50.00	
City	State	Zip Code		Form(Cash,Check,etc)				
Columbus	OH	43206		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 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: 925.00

Total expenditures this event:

Page Total $ 350.00