

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Jay Perez for Judge Committee</u>				
Full Name of Contributor <u>Melinda Lanning</u>			Registration Number, if PAC	
Street Address <u>5704 Fours Ash Lane</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>03 29 04 10.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43229</u>		Form (Cash, Check, etc.) <u>Cash</u>
Full Name of Contributor <u>Glen Rondo</u>			Registration Number, if PAC	
Street Address <u>78 N Oakley</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>03 29 04 70.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43204</u>		Form (Cash, Check, etc.) <u>Cash</u>
Full Name of Contributor <u>Chris McCoy</u>			Registration Number, if PAC	
Street Address <u>563 Columbus St</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>03 29 04 40.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43204</u>		Form (Cash, Check, etc.) <u>Cash</u>
Full Name of Contributor <u>Barb Bahrts</u>			Registration Number, if PAC	
Street Address <u>563 Columbus St</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>03 29 04 20.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43206</u>		Form (Cash, Check, etc.) <u>Cash</u>
Full Name of Contributor <u>Phill Ross</u>			Registration Number, if PAC	
Street Address <u>10123 Licking Trails</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>03 29 04 20.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43206</u>		Form (Cash, Check, etc.) <u>Cash</u>
Full Name of Contributor <u>Pat Stevens</u>			Registration Number, if PAC	
Street Address <u>337 N. Eldon Ave</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>03 29 04 10.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43204</u>		Form (Cash, Check, etc.) <u>Cash</u>
Full Name of Contributor <u>Mike Burns</u>			Registration Number, if PAC	
Street Address <u>484 Crestview Rd</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>03 29 04 15.00</u>
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43202</u>		Form (Cash, Check, etc.) <u>Cash</u>

\* 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

Total contributions this event

\$0.00 <u>617.00</u>
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Total expenditures this event

\$0.00
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Page Total \$

135.00