

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

Prescribed by Secretary of State 03/05

Event Date 4/11/13

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Name of Committee in Full McKinley for Judge							
Full Name of Contributor Christopher M. Brown				Registration Number, if PAC			
Street Address 601 S. High Street, Floor 1		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2	\$250.00
City Columbus		State OH	Zip Code 43215	Form (Cash, Check, etc.) Check			
Full Name of Contributor John A. Conner, II				Registration Number, if PAC			
Street Address 436 W. Fifth Avenue		Employer/Occupation/Labor Organization* Judge, 10th District Court of Appeals		M	D	Y	Amount
				0	3	2	\$100.00
City Columbus		State OH	Zip Code 43201	Form (Cash, Check, etc.) Check			
Full Name of Contributor Gary W. Hammond				Registration Number, if PAC			
Street Address 556 E. Town Street		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	4	0	\$250.00
City Columbus		State OH	Zip Code 43215	Form (Cash, Check, etc.) Check			
Full Name of Contributor Jennifer Brunner				Registration Number, if PAC			
Street Address 35 North Fourth Street, Suite 200		Employer/Occupation/Labor Organization* Attorney, Brunner Quinn		M	D	Y	Amount
				0	4	1	\$20.00
City Columbus		State OH	Zip Code 43215	Form (Cash, Check, etc.) Cash			
Full Name of Contributor Robert J. Walter				Registration Number, if PAC			
Street Address 3040 Lane Woods Court		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	4	1	\$100.00
City Columbus		State OH	Zip Code 43221	Form (Cash, Check, etc.) Check			
Full Name of Contributor Kristen J. Brown				Registration Number, if PAC			
Street Address 1489 Oakbourne Drive		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	4	1	\$100.00
City Worthington		State OH	Zip Code 43235	Form (Cash, Check, etc.) Check			
Full Name of Contributor Dennis A. Roberge				Registration Number, if PAC			
Street Address 372 Cumberland Drive		Employer/Occupation/Labor Organization* Not employed, Retired		M	D	Y	Amount
				0	4	1	\$100.00
City Whitehall		State OH	Zip Code 43213	Form (Cash, Check, etc.) 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 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

Total expenditures this event.

\$0.00

\$0.00

Page Total \$ 920.00