

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

| | | | | | |
|--|---|--------------------------|---|-----------------------------|------------------------|
| Name of Committee in Full White for Judge Committee | | | | | |
| Full Name of Contributor Alissa Holfinger (court appointed) | | | | Registration Number, if PAC | |
| Street Address 501 S. High St. | Employer/Occupation/Labor Organization* | | M 0 | D 3 | Y 2 |
| City Columbus | State O | Zip Code 43215 | Form (Cash, Check, etc) check | | Amount 35.00 |
| Full Name of Contributor Law Office of Joy L. Marshall, Esq. (court appointed) | | | | | |
| Street Address 336 S. High Street | Employer/Occupation/Labor Organization* | | M 0 | D 3 | Y 2 |
| City Columbus | State O | Zip Code 43215 | Form (Cash, Check, etc) check | | Amount 35.00 |
| Full Name of Contributor Edwin Malek | | | | | |
| Street Address 1227 South High Street | Employer/Occupation/Labor Organization* | | M 0 | D 3 | Y 2 |
| City Columbus | State O | Zip Code 43206 | Form (Cash, Check, etc) check | | Amount 50.00 |
| Full Name of Contributor | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | M | D | Y |
| City | State | Zip Code | Form (Cash, Check, etc) | | Amount |
| Full Name of Contributor | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | M | D | Y |
| City | State | Zip Code | Form (Cash, Check, etc) | | Amount |
| Full Name of Contributor | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | M | D | Y |
| City | State | Zip Code | Form (Cash, Check, etc) | | Amount |
| Full Name of Contributor | | | | | |
| Street Address | Employer/Occupation/Labor Organization* | | M | D | Y |
| City | State | Zip Code | Form (Cash, Check, etc) | | Amount |

* 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

2,195.00

Total expenditures this event

0.00

Page Total \$ 120.00