

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

Prescribed by Secretary of State 03/05

Name of Committee in Full McKinley for Judge				
Full Name of Contributor Jeffrey D. Mackey			Registration Number, if PAC	
Street Address 1538 Metrose Avenue	Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus	State OH	Zip Code 43224	Y 1	Amount \$100.00
			Form (Cash, Check, etc.) Check	
Full Name of Contributor G. Gary Tyack			Registration Number, if PAC	
Street Address 381 Loveman Avenue	Employer/Occupation/Labor Organization* Judge, 10th District Court of Appeals		M 0	D 4
City Worthington	State OH	Zip Code 43085	Y 1	Amount \$100.00
			Form (Cash, Check, etc.) Check	
Full Name of Contributor Judith B. Goldstein			Registration Number, if PAC	
Street Address 910 3rd Street	Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus	State OH	Zip Code 43206	Y 1	Amount \$100.00
			Form (Cash, Check, etc.) Check	
Full Name of Contributor Catherine Harper-Lee			Registration Number, if PAC	
Street Address 2441 Shillingham Court	Employer/Occupation/Labor Organization*		M 0	D 4
City Powell	State OH	Zip Code 43065	Y 1	Amount \$100.00
			Form (Cash, Check, etc.) Check	
Full Name of Contributor Jean M. Williams			Registration Number, if PAC	
Street Address 6367 Portsmouth Drive	Employer/Occupation/Labor Organization* Not employed, Retired		M 0	D 4
City Reynoldsburg	State OH	Zip Code 43068	Y 1	Amount \$50.00
			Form (Cash, Check, etc.) Check	
Full Name of Contributor Vorys, Sater, Seymour & Pease LLP			Registration Number, if PAC OH109	
Street Address 52 E. Gay Street, P.O. Box 1008	Employer/Occupation/Labor Organization*		M 0	D 4
City Columbus	State OH	Zip Code 43215	Y 1	Amount \$500.00
			Form (Cash, Check, etc.) Check	
Full Name of Contributor Gerald J. Babbitt			Registration Number, if PAC	
Street Address 503 S. Front Street, Suite 200	Employer/Occupation/Labor Organization* Attorney, Babbitt & Weis		M 0	D 4
City Columbus	State OH	Zip Code 43215	Y 1	Amount \$100.00
			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

\$0.00

Total expenditures this event.

\$0.00

Page Total \$1,050.00