Event Date	8/27/13
Page	40

Statement of Contributions Received at a Social or Fundraising Event

	Prescribed by Sec	retary of State 3/05						
Name of Committee in Full								
Gwen Callender for Judge				n Numl	er, if PA	.c		
Klein Committee					,			
Street Address	Employer/Occup	ation/Labor Organization*	М	Đ	Y	Amount		
545 East Town Street			0 9 1				150.00	
City	State	Zip Code	Form(Cash					
Columbus	OIH	43215	Check					
Full Name of Contributor			Registration	n Numb	er, if PA	C		
Street Address	Employer/Occupa	ation/Labor Organization*	M	M D Y Amount				
City	State	Zip Code	Form(Cash	Check	,etc)			
	1 1							
Full Name of Contributor	-	<u> </u>	Registration	n Numl	er, if PA	C		
Street Address	Employer/Occup	ation/Labor Organization*	М	D	Y	Amount		
Succi Addiess	Employer	Employer/occupation Easter Organization		Ī	Ì			
City	State	Zip Code	Form(Cash	Check	,etc)			
·	ļ <u> </u>							
Full Name of Contributor			Registration Number, if PAC					
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*		M D Y Amount				
50.44.1.18.2.433]			
City	State	Zip Code	Form(Cash	Check	,etc)			
		_						
Full Name of Contributor			Registratio	n Numl	per, if PA	.c		
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*			Y	Amount		
				1	1			
City	State	Zip Code	Form(Cash	,Check	,etc)			
Full Name of Contributor			Registration	n Numl	ber, if PA	ıC		
Street Address	Employer/Occup	ation/Labor Organization*	М	Đ	Y	Amount	_	
oneet runness				1	1			
City	State	Zip Code	Form(Cash	,Check	,etc)			
		<u> </u>						
Full Name of Contributor			Registratio	n Numi	ber, if PA	AC .		
Street Address	Address Employer: Occupation/Labor Organization*		M	D	Y	Amount		
City	State	Zip Code	Form(Cash	Form(Cash,Check,etc)				

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

Total contributions this event	Total expenditures this event		
		Page Total S	<u> 150.00</u>
_			

organization of which the employees are members, if any, must appear. [R.C. 3517.10(B)(4)]