

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Committee to Keep Judge Squire</b>									
Full Name of Contributor <b>Vonzie L. Dansby</b>						Registration Number, if PAC			
Street Address <b>2117 Willamont Ave.</b>			Employer/Occupation/Labor Organization*			M	D	Y	Amount <b>50.00</b>
City <b>Columbus</b>			State <b>OH</b>	Zip Code <b>43219</b>		Form (Cash, Check, etc) <b>check</b>			
Full Name of Contributor <b>Jacqueline Y.W. Beale</b>						Registration Number, if PAC			
Street Address <b>1036 Brice Rd</b>			Employer/Occupation/Labor Organization*			M	D	Y	Amount <b>50.00</b>
City <b>Reynoldsburg</b>			State <b>OH</b>	Zip Code <b>43068</b>		Form (Cash, Check, etc) <b>check</b>			
Full Name of Contributor <b>Cheryl J. Parker</b>						Registration Number, if PAC			
Street Address <b>6233 Windbrook Dr.</b>			Employer/Occupation/Labor Organization*			M	D	Y	Amount <b>50.00</b>
City <b>Blacklick</b>			State <b>OH</b>	Zip Code <b>43004</b>		Form (Cash, Check, etc) <b>check</b>			
Full Name of Contributor <b>Ryland H. Mullins</b>						Registration Number, if PAC			
Street Address <b>1281 N. 6th Street</b>			Employer/Occupation/Labor Organization*			M	D	Y	Amount <b>50.00</b>
City <b>Columbus</b>			State <b>OH</b>	Zip Code <b>43201</b>		Form (Cash, Check, etc) <b>check</b>			
Full Name of Contributor <b>Ruth Squire</b>						Registration Number, if PAC			
Street Address <b>3405 Kiwatha Rd</b>			Employer/Occupation/Labor Organization*			M	D	Y	Amount <b>53.00</b>
City <b>Youngstown</b>			State <b>OH</b>	Zip Code <b>44511</b>		Form (Cash, Check, etc) <b>check</b>			
Full Name of Contributor <b>Lester Wright</b>						Registration Number, if PAC			
Street Address <b>2268 Liston Avenue</b>			Employer/Occupation/Labor Organization*			M	D	Y	Amount <b>53.00</b>
City <b>Columbus</b>			State <b>OH</b>	Zip Code <b>43207</b>		Form (Cash, Check, etc) <b>check</b>			
Full Name of Contributor <b>Mildred L. Payne</b>						Registration Number, if PAC			
Street Address <b>960 Katherine Ave</b>			Employer/Occupation/Labor Organization*			M	D	Y	Amount <b>53.00</b>
City <b>Youngstown</b>			State <b>OH</b>	Zip Code <b>44505</b>		Form (Cash, Check, etc) <b>check</b>			

\* 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

**2506.11**

Total expenditures this event

**.00**

Page Total \$ **359.00**