

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full David Young for Judge Committee					
Full Name of Contributor Thomas F Martello Jr				Registration Number, if PAC	
Street Address 995 S High St	Employer/Occupation/Labor Organization*		M 0	D 9	Y 14
City Columbus	State OH	Zip Code 43206	Form(Cash,Check,etc) Check		
Full Name of Contributor Mark C Collins Co LPA				Registration Number, if PAC	
Street Address 492 S High St, 3rd Fl	Employer/Occupation/Labor Organization*		M 0	D 9	Y 14
City Columbus	State OH	Zip Code 43215	Form(Cash,Check,etc) Check		
Full Name of Contributor The Donahey Law Firm LLC				Registration Number, if PAC	
Street Address 495 S High St, Ste 300	Employer/Occupation/Labor Organization*		M 0	D 9	Y 14
City Columbus	State OH	Zip Code 43215	Form(Cash,Check,etc) Check		
Full Name of Contributor Yacobozzi Drakatos LLC				Registration Number, if PAC	
Street Address 1243 S High St	Employer/Occupation/Labor Organization*		M 0	D 9	Y 14
City Columbus	State OH	Zip Code 43206	Form(Cash,Check,etc) Check		
Full Name of Contributor James G Sicaras				Registration Number, if PAC	
Street Address 1955 Upper Chelsea Rd	Employer/Occupation/Labor Organization*		M 0	D 9	Y 14
City Upper Arlington	State OH	Zip Code 43221	Form(Cash,Check,etc) Check		
Full Name of Contributor Meridian-Henderson				Registration Number, if PAC	
Street Address 1736 W Fifth Ave	Employer/Occupation/Labor Organization*		M 0	D 9	Y 14
City Columbus	State OH	Zip Code 43212	Form(Cash,Check,etc) Check		
Full Name of Contributor Dahman Law LLC				Registration Number, if PAC	
Street Address 2 Miranova Pl, Ste 500	Employer/Occupation/Labor Organization*		M 0	D 9	Y 14
City Columbus	State OH	Zip Code 43215	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 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

Page Total \$ 1,200.00