

# Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

|  |   |                          |                                      |                             |                         |
|--|---|--------------------------|--------------------------------------|-----------------------------|-------------------------|
| Name of Committee in Full<br><b>Glaeden for Judge</b>                                |   |                          |                                      |                             |                         |
| Full Name of Contributor<br><b>Ross &amp; Midian</b>                                 |   |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>577 South High Street</b>                                       | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>6</b>               | Y<br><b>1109</b>        |
| City<br><b>Columbus</b>  | State<br><b>O   H</b>                   | Zip Code<br><b>43215</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>100.00</b> |
| Full Name of Contributor<br><b>Sheryl K. Munson</b>                                  |   |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>3700 Rivervail Drive</b>  | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>6</b>               | Y<br><b>1109</b>        |
| City<br><b>Columbus</b>  | State<br><b>O   H</b>                   | Zip Code<br><b>43221</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>100.00</b> |
| Full Name of Contributor<br><b>Jon J. Saia **</b>                                    |   |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>713 S. Front Street</b>   | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>6</b>               | Y<br><b>1109</b>        |
| City<br><b>Columbus</b>  | State<br><b>O   H</b>                   | Zip Code<br><b>43206</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>100.00</b> |
| Full Name of Contributor<br><b>Frederick T. Moses</b>                                |   |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>19538 Carroll Road</b>  | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>6</b>               | Y<br><b>1109</b>        |
| City<br><b>Rockbridge</b>  | State<br><b>O   H</b>                   | Zip Code<br><b>43149</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>100.00</b> |
| Full Name of Contributor<br><b>Barnhart Law Office, LLC</b>                          |   |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>595 1/2 S. Third Street</b>                                     | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>6</b>               | Y<br><b>1109</b>        |
| City<br><b>Columbus</b>  | State<br><b>O   H</b>                   | Zip Code<br><b>43215</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>75.00</b>  |
| Full Name of Contributor<br><b>Gallagher, Gams, Pryor, Tallan &amp; Littrell LLP</b> |   |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>471 E. Broad Street, 19th Floor</b>                             | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>6</b>               | Y<br><b>1109</b>        |
| City<br><b>Columbus</b>  | State<br><b>O   H</b>                   | Zip Code<br><b>43215</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</b>  |
| Full Name of Contributor<br><b>Newhouse, Prophater, Letcher &amp; Moots, LLC</b>     |   |                          |                                      | Registration Number, if PAC |                         |
| Street Address<br><b>5025 Arlington Centre Blvd., Suite 400</b>                      | Employer/Occupation/Labor Organization* |                          | M<br><b>0</b>                        | D<br><b>6</b>               | Y<br><b>1109</b>        |
| City<br><b>Columbus</b>  | State<br><b>O   H</b>                   | Zip Code<br><b>43220</b> | Form(Cash,Check,etc)<br><b>Check</b> |                             | Amount<br><b>50.00</b>  |

**\*\* Previously served as a court appointee during term**

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 575.00