



Statement of Contributions Received

Form 31-A

ORC 3517.10

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Full Name of Committee Committee to elect George W. Leach Judge				
Full Name of Contributor Dickinson Wright L.L.C. (for Peter Kulick) - 3 people on one check			Registration Number, if PAC	
Street Address 150 E. Gay St., 24th Fl.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 09/25/2017	Amount \$100.00
Full Name of Contributor Dickinson Wright, L.L.C. (for L. Pahl Zinn) - 3 people on one check			Registration Number, if PAC	
Street Address 150 E. Gay St., 24th Fl.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 09/25/2017	Amount \$100.00
Full Name of Contributor Ruth Ann Newcomer			Registration Number, if PAC	
Street Address 2240 Coventry Rd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43221	Date (MM/DD/YYYY) 10/11/2017	Amount \$50.00
Full Name of Contributor Sharon Weiss			Registration Number, if PAC	
Street Address 12 Brunson Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43203	Date (MM/DD/YYYY) 10/11/2017	Amount \$100.00
Full Name of Contributor Catherine Adams			Registration Number, if PAC	
Street Address 754 S. Lazelle St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43204	Date (MM/DD/YYYY) 10/11/2017	Amount \$100.00

*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)]

Page Total \$450.00