



**Statement of Contributions Received
at a Social or Fund-Raising Event**
Form 31-E
R.C. 3517.10(B)

Full Name of Committee Committee to Re-elect Judge Gill				
Full Name of Contributor Nancy Battista-Allen			Registration Number, if PAC	
Street Address 284 Highmeadows Village Drive		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Powell		State OH	Zip Code 43065	Amount \$300.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Wes Hoag			Registration Number, if PAC	
Street Address 2057 Upper Chelsea Road		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Upper Arlington		State OH	Zip Code 43221	Amount \$150.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Doug Klingel			Registration Number, if PAC	
Street Address 1989 Ridgecliff Rd		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Upper Arlington		State OH	Zip Code 43221	Amount \$250.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Janet McGarr			Registration Number, if PAC	
Street Address 1391 La Rochelle Drive		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Upper Arlington		State OH	Zip Code 43221	Amount \$600.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Gary J. Gottfried Co., LPA			Registration Number, if PAC	
Street Address 608 Office Parkway, Ste B		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Westerville		State OH	Zip Code 43082	Amount \$750.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Megan Gibson *			Registration Number, if PAC	
Street Address 6581 Hilmar Court		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Westerville		State OH	Zip Code 43082	Amount \$150.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Walter Hauser			Registration Number, if PAC	
Street Address 400 Fairway Blvd		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Whitehall		State OH	Zip Code 43213	Amount \$100.00
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 also 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.

* connotes court appointed expert or attorney/GAL list
** relative of court employee

Total Contributions This Event	Total Expenses This Event	Page Total: \$ 2300
--------------------------------	---------------------------	----------------------------