



**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 Holly Brown			Registration Number, if PAC	
Street Address 4190 Kendale Road		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43220	Amount \$150.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Robert Burman			Registration Number, if PAC	
Street Address 580 S. High Street		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43215	Amount \$500.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Bonnie Burman			Registration Number, if PAC	
Street Address 580 S. High Street		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43215	Amount \$500.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Dale Butland			Registration Number, if PAC	
Street Address 3872 Stonewater Drive		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43221	Amount \$150.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Bill Butler			Registration Number, if PAC	
Street Address 1107 Euclaire Ave, Apt. A		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43209	Amount \$150.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Eugene Butler			Registration Number, if PAC	
Street Address 400 S. Fifth Street; Ste 200		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43215	Amount \$150.00
Form: Cash, Check, etc CHECK				
Full Name of Contributor Joel R. Campbell			Registration Number, if PAC	
Street Address 575 S. Third Street		Employer/Occupation/Organization		MM/DD/YYYY 02/01/18
City Columbus		State OH	Zip Code 43215	Amount \$150.00
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: \$ 1900 -
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