

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Dingus For Judge</b>							
Full Name of Contributor <b>Donald Wick</b>					Registration Number, if PAC		
Street Address <b>23 E. High St.</b>		Employer/Occupation/Labor Organization* <b>Don Wick, Attorney</b>		M <b>0</b>	D <b>2</b>	Y <b>1</b>	Amount <b>100.00</b>
City <b>Mt. Gilead</b>		State <b>O</b>	Zip Code <b>43338</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Christopher Minillo</b>					Registration Number, if PAC		
Street Address <b>1500 W. Third Ave., Suite 210</b>		Employer/Occupation/Labor Organization* <b>Chris Minillo, Attorney</b>		M <b>0</b>	D <b>2</b>	Y <b>1</b>	Amount <b>100.00</b>
City <b>Columbus</b>		State <b>O</b>	Zip Code <b>43212</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Robert &amp; Ella Stanley</b>					Registration Number, if PAC		
Street Address <b>1711 Bellefonte Road</b>		Employer/Occupation/Labor Organization* <b>Retired</b>		M <b>0</b>	D <b>2</b>	Y <b>1</b>	Amount <b>150.00</b>
City <b>Flatwoods</b>		State <b>K</b>	Zip Code <b>41139</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Mark Granger</b>					Registration Number, if PAC		
Street Address <b>132 Northwoods Blvd.</b>		Employer/Occupation/Labor Organization* <b>Granger Co. LPA - Attorne</b>		M <b>0</b>	D <b>2</b>	Y <b>1</b>	Amount <b>150.00</b>
City <b>Columbus</b>		State <b>O</b>	Zip Code <b>43235</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Mike Elligott</b>					Registration Number, if PAC		
Street Address <b>511 E. Jeffrey Place</b>		Employer/Occupation/Labor Organization* <b>Self - Attorney</b>		M <b>0</b>	D <b>2</b>	Y <b>1</b>	Amount <b>150.00</b>
City <b>Columbus</b>		State <b>O</b>	Zip Code <b>43214</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Clint Helmbrecht</b>					Registration Number, if PAC		
Street Address <b>5943 Wilderness Drive</b>		Employer/Occupation/Labor Organization* <b>Self - Prospera Financial Gr</b>		M <b>0</b>	D <b>2</b>	Y <b>1</b>	Amount <b>50.00</b>
City <b>New Albany</b>		State <b>O</b>	Zip Code <b>43054</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Travis Faulk</b>					Registration Number, if PAC		
Street Address <b>285 Gary Lee Drive</b>		Employer/Occupation/Labor Organization* <b>Northwestern Mutual Fina</b>		M <b>0</b>	D <b>2</b>	Y <b>1</b>	Amount <b>100.00</b>
City <b>Gahanna</b>		State <b>O</b>	Zip Code <b>43230</b>	Form(Cash,Check,etc) <b>Check</b>			

\* 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  

N/A

Total expenditures this event  

N/A

Page Total \$ 800.00