

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Elect Ronald Plymale Judge				
Full Name of Contributor Edwin L. Malek			Registration Number, if PAC	
Street Address 1227 S. High St.	Employer/Occupation/Labor Organization* Edwin L. Malek/Lawyer		M 0	D 4
City Columbus	State OH	Zip Code 43206	Y 0	Amount \$500.00
Full Name of Contributor Howard Morgan			Registration Number, if PAC	
Street Address 906 E. Broad Street	Employer/Occupation/Labor Organization* Morgan & Justice Co LPA/Lawyer		M 0	D 4
City Columbus	State OH	Zip Code 43205	Y 0	Amount \$250.00
Full Name of Contributor Nancy A. Dreyer			Registration Number, if PAC	
Street Address 3880 Riverview Drive	Employer/Occupation/Labor Organization* S/E/Realtor		M 0	D 4
City Columbus	State OH	Zip Code 43221	Y 0	Amount \$100.00
Full Name of Contributor Charles Braithwaite			Registration Number, if PAC	
Street Address 211 E. Como Ave	Employer/Occupation/Labor Organization* Cols St./Printer		M 0	D 4
City Columbus	State OH	Zip Code	Y 0	Amount \$150.00
Full Name of Contributor Brian J. McNamara			Registration Number, if PAC	
Street Address 87 Kimothy Dr.	Employer/Occupation/Labor Organization* Brian J. McNamara CPA		M 0	D 3
City Westerville	State OH	Zip Code 43081	Y 0	Amount \$100.00
Full Name of Contributor Sharon E. Airhart			Registration Number, if PAC	
Street Address 587 Glenridge Pl.	Employer/Occupation/Labor Organization* Retired		M 0	D 3
City Columbus	State OH	Zip Code 43214	Y 0	Amount \$250.00
Full Name of Contributor Dennis k. Davidson			Registration Number, if PAC	
Street Address 10502 Cardingan Ridge Pl.	Employer/Occupation/Labor Organization* Forner Rubber/President		M 0	D 4
City Powell	State OH	Zip Code 43065	Y 0	Amount \$250.00

* 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)]

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

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Total expenditures this event.

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Page Total \$ **\$1,600.00**