

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

Prescribed by Secretary of State 03/05

Name of Committee in Full CAMPBELL FOR JUDGE				Registration Number, if PAC			
Full Name of Contributor Warren Van Tine		Employer/Occupation/Labor Organization*		M 0	D 8	Y 0	Amount \$100.00
Street Address 188 E. Kelso Road				0	8	0	
City Columbus		State OH	Zip Code 43202	9	1	0	
				Form (Cash, Check, etc.) ck			
Full Name of Contributor Crystal Cook		Employer/Occupation/Labor Organization*		M 0	D 8	Y 0	Amount \$35.00
Street Address 6942 Polpis Road				0	8	0	
City Reynoldsburg		State OH	Zip Code 43068	9	1	0	
				Form (Cash, Check, etc.) cash			
Full Name of Contributor Robert Bannerman		Employer/Occupation/Labor Organization*		M 0	D 8	Y 0	Amount \$20.00
Street Address 2362 Bridlewood Blvd.				0	8	0	
City Obetz		State OH	Zip Code 43207	9	1	0	
				Form (Cash, Check, etc.) cash			
Full Name of Contributor Victoria Tolbert		Employer/Occupation/Labor Organization*		M 0	D 8	Y 0	Amount \$5.00
Street Address 5942 Saranac Dr.				0	8	0	
City Columbus		State OH	Zip Code 43232	9	1	0	
				Form (Cash, Check, etc.) cash			
Full Name of Contributor Laura Miller		Employer/Occupation/Labor Organization*		M 0	D 8	Y 0	Amount \$80.00
Street Address 4557 Flower Garden Dr.				0	8	0	
City New Albany		State OH	Zip Code 43054	9	1	0	
				Form (Cash, Check, etc.) cash			
Full Name of Contributor Eddie B. Sands Jr.		Employer/Occupation/Labor Organization*		M 0	D 8	Y 0	Amount \$20.00
Street Address 947 E. Johnstown Rd.				0	8	0	
City Columbus		State OH	Zip Code 43230	9	1	0	
				Form (Cash, Check, etc.) cash			
Full Name of Contributor LeTreese Jones		Employer/Occupation/Labor Organization*		M 0	D 8	Y 0	Amount \$40.00
Street Address 3204 Gallant Drive				0	8	0	
City Columbus		State OH	Zip Code 43232	9	1	0	
				Form (Cash, Check, etc.) cash			

* 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

60.00

Total expenditures this event.

\$ 300.00