Received Page 1/24/11

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

	Prescribed by Secre	tary of State 03/05		
Name of Committee in Full				
Committee to Re-Elect Judge Peeples			In the Control of the Control	
Full Name of Contributor COLUMBUS/CENTRAL OHIO BUILDING TRAI	DES COUNCIL-ED	JCATION FUND	Registration Number, if PAC	
Street Address 555 E. Rich St., Rm. 217	Employer/Occupation/Labor Organization*		M D Y Amount 0 1 2 5 1 1 \$100.00	
City Columbus	State to OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
Full Name of Contributor FREDERICK D. BENTON, JR., LPA	•		Registration Number, if PAC	
Street Address 786 S FRONT ST, STE 204	Employer/Occupation/Labor Organization*		M D Y Amount 0 1 2 5 1 1 \$50.00	
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43206	Check	
Full Name of Contributor J. SCOTT WEISMAN LAW OFFICES, LPA			Registration Number, if PAC	
Street Address 601 S HIGH ST, 1ST FL	Employer/Occupation/Labor Organization*		M D Y Amount 0 1 1 2 1 1 \$250.00	
City Columbus	Staj te OH	Zip Code 43215	Form (Cash, Cheek, etc.) Check	
Full Name of Contributor JOSEPH A. BAHGAT CO., LPA			Registration Number, if PAC	
Street Address 605 NORTH HIGH STREET, STE 116	Employer/Occupation/Labor Organization*		M D Y Amount 830.00	
City Columbus	Sta te OH	Zip Code 43215	Form (Cash, Cheek, etc.) Check	
Full Name of Contributor LUFTMAN, HECK AND ASSOCIATES, LLP	·		Registration Number, if PAC	
Street Address 580 E RICH STREET	Employer/Occupation/Labor Organization*		0 1 1 4 1 1 Amount \$100.00	
City Columbus	Sta tc OH	Zip Code 43215	Form (Cash, Check, etc.) Check	·
Full Name of Contributor Paley for Columbus, Ben Espy, Treasurer	•		Registration Number, if PAC	
Street Address 668 Bellamy Place	Employer/Occupation/Labor Organization*		0 1 2 4 1 1 Amount \$100.00	
City Columbus	OH Stal te	Zip Code 43213	Form (Cash, Check, etc.) Check	
Full Name of Contributor PAUL SCOTT CO LPA			Registration Number, if PAC	
Street Address 536 S HIGH ST	Employer/Occup	ation/Labor Organization*	M D Y Amount \$150.00	
City Columbus	Stal te OH	Zip Code 43215	Form (Cash, Check, etc.) Check	
* Required for contributions from individuals over \$100 to si the individual's business, if any, rather than employer should labor organization of which the employees are members, if a Fill in the boxes below only on the last page for this event.	l be listed. If two or mor	e employees contribute via pa		

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	Total expenditures this event.
	Page Total \$