Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date	6/30/14
Page 12	

Woods for Judge Committee	Name of Committee in Full			-
Fell Name of Countbacter Jessica A. Mager Steet Address Employer/Occupation/Labor Organization* O				
Jessica A. Mager Sizert Address Employer/Occupation/Labor Organization* N		· · · · · · · · · · · · · · · · · · ·		Pegistration Number if PAC
Employer/Occupation/Labor Organization		registrator number, it the		
250		- In		M D M Amount
Suit Zip Code		Employer/Occupation/Labor Organization*		
Westerville		5.1.	T2:-0.1-	
Fall Name of Contributor James V. Maniace (Tax Account)	•		1 '	
James V. Maniace (Tax Account)		l Ou	43002	
Suret Address				Registration Number, it PAC
155 W. Main St., Apt. 605 Su tr Zip Code Form (Cask, Check, etc.) Check		·· ,		W I B I M I I I I I I I I I I I I I I I I
Stajite Zip Code				
Columbus				- 4 4 4 1 1 1 1 1 1
Full Name of Contributor Michael W. McElligott** Street Address Employer-Occupation/Labor Organization* N	•	') '	
Michael W. McElligott** Street Address Employer/Occupation/Labor Organization* O	•	UH	43215	_
Suret Address			Registration Number, if PAC	
State Zip Code Countributor Columbus				
Size Zip Code Contributor Contributo		Employer/Occupation/Labor Organization*		
Columbus				
Full Name of Contributor		,	ļ '	
Timothy P. Nagy Street Address Employer/Occupation/Labor Organization* Nt D T Amount Start Zip Code Check		ОН	43214	
Street Address				Registration Number, if PAC
1075 Brookhouse Lane				
State		Employer/Occupation/Labor Organization*		
Gahanna				
Full Name of Contributor	City	, ,	Zip Code	
Street Address 1669 Roxbury Road Employer/Occupation/Labor Organization* Nf. 3 0 1 4 \$150.00		ј он	43230	
Employer/Occupation/Labor Organization*				Registration Number, if PAC
The contributor Columbus Co	vv. Colleen Ogle			
City Columbus Full Name of Contributor 288 Winthrop Road City Columbus Employer/Occupation/Labor Organization* State Address Columbus Employer/Occupation/Labor Organization* State City Columbus Employer/Occupation/Labor Organization* State City Columbus Full Name of Contributor Craig B. Paynter Employer/Occupation/Labor Organization* Registration Number, if PAC Registration Number, if PAC Craig B. Paynter Employer/Occupation/Labor Organization* Registration Number, if PAC Craig B. Paynter Street Address 196 S. Grant Ave., #602 Employer/Occupation/Labor Organization* State Cip Code Form (Cash, Check, etc.) Amount Street Address 196 S. Grant Ave., #602 Form (Cash, Check, etc.)		Employer/Occupation/Labor Organization*		
Columbus OH 43212 check Full Name of Contributor Joseph M. Patchen Street Address 288 Winthrop Road City Columbus Stale Columbus Craig B. Paynter Street Address 196 S. Grant Ave., #602 OH A3212 Registration Number, if PAC Stale City Code OH A3214 Check Registration Number, if PAC Craig B. Paynter Street Address 196 S. Grant Ave., #602 City Columbus Full Name of Contributor Craig B. Paynter Employer/Occupation/Labor Organization* M. D O G S O T Amount Street Address 196 S. Grant Ave., #602 Form (Cash, Check, etc.) Stale Zip Code Form (Cash, Check, etc.)	1669 Roxbury Road			0 6 3 0 1 4 \$150.00
Full Name of Contributor Joseph M. Patchen Street Address 288 Winthrop Road City Columbus Full Name of Contributor Columbus Employer/Occupation/Labor Organization* State City Code Columbus Full Name of Contributor Craig B. Paynter Employer/Occupation/Labor Organization* Registration Number, if PAC Registration Number, if PAC Street Address 196 S. Grant Ave., #602 Employer/Occupation/Labor Organization* M. D. Y. Amount Street Address 196 S. Grant Ave., #602 Employer/Occupation/Labor Organization* State Zip Code Form (Cash, Check, etc.)	·		1 -	•
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288 Winthrop Road	Joseph M. Patchen			
City Columbus State OH State OH State Code Columbus Form (Cash, Check, etc.) Check Registration Number, if PAC Street Address 196 S. Grant Ave., #602 State		Employer/Occupation/Labor Organization*		
Columbus	288 Winthrop Road			0 6 3 0 1 4 3400.00
Full Name of Contributor Craig B. Paynter Street Address 196 S. Grant Ave., #602 Employer/Occupation/Labor Organization* M. D Y Amount 0 6 3 0 1 4 \$100.00 City Sta te Zip Code Form (Cash, Check, etc.)	City			
Craig B. Paynter Employer/Occupation/Labor Organization* M. D O D D D D D D D D D D D D D D D D D	Columbus	OH	43214	check
Employer/Occupation/Labor Organization*	Full Name of Contributor	Registration Number, if PAC		
196 S. Grant Ave., #602 O 6 3 0 1 4 \$100.00	Craig B. Paynter			
City State Zip Code Form (Cash, Check, etc.)	Street Address	Employer/Occupation/Labor Organization*		
1	196 S. Grant Ave., #602			0 6 3 0 1 4 \$100.00
Columbus OH 43215 check	City	Stal te		Form (Cash, Check, etc.)
	Columbus	OH	43215	check

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	Total expenditures this event.
\$0.00	\$0.00

\$925.00 Page Total \$

^{*} 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)]