

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

Prescribed by Secretary of State 3/05

Name of Committee in Full		Employer/Occupation/Labor Organization*		M	D	Y	Amount
David Young For Judge Committee							
Full Name of Contributor Lewis Dyer							Registration Number, if PAC
Street Address 555 S. Third	City Columbus	State OH	Zip Code 43215	0	2	1	40.00
				Form(Cash,Check,etc) Cash			
Full Name of Contributor George Breitmayer							Registration Number, if PAC
Street Address 133 E. Livingston	City Columbus	State OH	Zip Code 43215	0	2	1	50.00
				Form(Cash,Check,etc) Cash			
Full Name of Contributor David Rieser							Registration Number, if PAC
Street Address 2 Miranova Place	City Columbus	State OH	Zip Code 43215	0	2	1	60.00
				Form(Cash,Check,etc) Cash			
Full Name of Contributor Michael Reed							Registration Number, if PAC
Street Address 1473 Cardiff Road	City Upper Arlington	State OH	Zip Code 43221	0	2	1	100.00
				Form(Cash,Check,etc) Check			
Full Name of Contributor Michael Fultz							Registration Number, if PAC
Street Address 452 S. Otterbein	City Westerville	State OH	Zip Code 43081	0	2	1	100.00
				Form(Cash,Check,etc) Check			
Full Name of Contributor Zeiger, Tigges & Little							Registration Number, if PAC
Street Address 41 S. High	City Columbus	State OH	Zip Code 43215	0	1	2	250.00
				Form(Cash,Check,etc) Check			
Full Name of Contributor Eric Zalud							Registration Number, if PAC
Street Address 3576 Thornapple	City Pepper Pike	State OH	Zip Code 44124	0	1	1	50.00
				Form(Cash,Check,etc) Check			

\* 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  
1,475.00

Total expenditures this event  
 

Page Total \$ 650.00