

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full Thomas Haves for Judge Committee					
Full Name of Contributor Dianna Downing				Registration Number, if PAC .	
Street Address 295 Stewart Ave.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 2014
City Columbus	State OH	Zip Code 43206	Form(Cash,Check,etc) Check		Amount 50.00
Full Name of Contributor Diane Gehres				Registration Number, if PAC	
Street Address 1386 Haines Ave.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 2014
City Columbus	State OH	Zip Code 43212	Form(Cash,Check,etc) Check		Amount 25.00
Full Name of Contributor Cathy Kurila				Registration Number, if PAC	
Street Address 49 Tibet Rd.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 2014
City Columbus	State OH	Zip Code 43202	Form(Cash,Check,etc) Check		Amount 100.00
Full Name of Contributor Jeff Linn: Yavitch & Palmer				Registration Number, if PAC	
Street Address 511 S. High St.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 2014
City Columbus	State OH	Zip Code 43215	Form(Cash,Check,etc) Check		Amount 500.00
Full Name of Contributor Jan Davies				Registration Number, if PAC	
Street Address 2746 Brandon Rd.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 2014
City Columbus	State OH	Zip Code 43221	Form(Cash,Check,etc) Cash		Amount 100.00
Full Name of Contributor Jason Younger				Registration Number, if PAC	
Street Address 507 Loveman Ave.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 2014
City Worthington	State OH	Zip Code 43085	Form(Cash,Check,etc) Cash		Amount 60.00
Full Name of Contributor Mary Younger				Registration Number, if PAC	
Street Address 215 E. Whittier St.	Employer/Occupation/Labor Organization*		M 0	D 9	Y 2014
City Columbus	State OH	Zip Code 43206	Form(Cash,Check,etc) Cash		Amount 40.00

* 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 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

Total expenditures this event

Page Total \$ 875.00