

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

Prescribed by Secretary of State 03/05

| | | | | | |
|---|--|--------------------------|-----------------------------------|---|----------|
| Name of Committee in Full Committee to Elect Ronald Plymale Judge | | | | | |
| Full Name of Contributor Contributor of \$25 or less | | | Registration Number, if PAC | | |
| Street Address | Employer/Occupation/Labor Organization* | M | D | Y | Amount |
| | | 0 | 5 | 0 | \$20.00 |
| City | State OH | Zip Code | Form (Cash, Check, etc.) cash | | |
| Full Name of Contributor Contributor of \$25 or less | | | Registration Number, if PAC | | |
| Street Address | Employer/Occupation/Labor Organization* | M | D | Y | Amount |
| | | 0 | 5 | 0 | \$20.00 |
| City | State OH | Zip Code | Form (Cash, Check, etc.) cash | | |
| Full Name of Contributor Contributor of \$25 or less | | | Registration Number, if PAC | | |
| Street Address | Employer/Occupation/Labor Organization* | M | D | Y | Amount |
| | | 0 | 5 | 0 | \$20.00 |
| City | State OH | Zip Code | Form (Cash, Check, etc.) cash | | |
| Full Name of Contributor Gregory Carr | | | Registration Number, if PAC | | |
| Street Address 200 W. 4th Ave | Employer/Occupation/Labor Organization* City Planner | M | D | Y | Amount |
| | | 0 | 5 | 0 | \$25.00 |
| City Columbus | State OH | Zip Code 43201 | Form (Cash, Check, etc.) Check | | |
| Full Name of Contributor Donald V. Junker | | | Registration Number, if PAC | | |
| Street Address 1430 Mulford Road | Employer/Occupation/Labor Organization* Teacher | M | D | Y | Amount |
| | | 0 | 5 | 0 | \$35.00 |
| City Columbus | State OH | Zip Code 43212 | Form (Cash, Check, etc.) Check | | |
| Full Name of Contributor Charlie F. Kenedy | | | Registration Number, if PAC | | |
| Street Address 1994 Suffolk Road, Unit 3 | Employer/Occupation/Labor Organization* Retired | M | D | Y | Amount |
| | | 0 | 5 | 0 | \$100.00 |
| City Columbus | State OH | Zip Code 43221 | Form (Cash, Check, etc.) Check | | |
| Full Name of Contributor Dennis Behm | | | Registration Number, if PAC | | |
| Street Address 312 West Third Ave | Employer/Occupation/Labor Organization* Lawyer | M | D | Y | Amount |
| | | 0 | 5 | 0 | \$100.00 |
| City Columbus | State OH | Zip Code 43201 | 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 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

~~\$0.00~~
\$1,255.00

Total expenditures this event.

~~\$144~~ \$0.00

Page Total \$ **\$320.00**