

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Committee to Re-Elect Judge Hummer</b>										
Full Name of Contributor <b>Richard Finn</b>				Registration Number, if PAC						
Street Address <b>475 Garden Road</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount			
				0	7	2	2	1	5	\$50.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43214</b>	Form (Cash, Check, etc.) <b>Cash</b>						
Full Name of Contributor <b>Carl Meyer</b>				Registration Number, if PAC						
Street Address <b>156 Fallis</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount			
				0	7	2	2	1	5	\$100.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43214</b>	Form (Cash, Check, etc.) <b>Cash</b>						
Full Name of Contributor <b>John Erley</b>				Registration Number, if PAC						
Street Address <b>1955 Prince George Dr., Apt. A</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount			
				0	7	2	2	1	5	\$30.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>42309</b>	Form (Cash, Check, etc.) <b>Cash</b>						
Full Name of Contributor <b>Dennis O. Kaps</b>				Registration Number, if PAC						
Street Address <b>61 Leland Ave.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount			
				0	7	2	2	1	5	\$35.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43214</b>	Form (Cash, Check, etc.) <b>Check</b>						
Full Name of Contributor <b>Contributions of \$25.00 or Less</b>				Registration Number, if PAC						
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount			
				0	7	2	2	1	5	\$100.00
City		State	Zip Code	Form (Cash, Check, etc.) <b>Check</b>						
Full Name of Contributor				Registration Number, if PAC						
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount			
City		State	Zip Code	Form (Cash, Check, etc.)						
Full Name of Contributor				Registration Number, if PAC						
Street Address		Employer/Occupation/Labor Organization*		M	D	Y	Amount			
City		State	Zip Code	Form (Cash, Check, etc.)						

\* 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**

Total expenditures this event  
**\$0.00**

Page Total \$ **\$315.00**