



Statement of Contributions Received

Form 31-A

ORC 3517.10

Full Name of Committee The Committee to Re-Elect Judge McIntosh				
Full Name of Contributor David A. Bressman			Registration Number, if PAC	
Street Address 5186 Blazzer Parkway		Employer/Occupation/Labor Organization* Self-employed		Form (Cash, Check, etc.) Check
City Dublin	State OH	Zip Code 43017	Date (MM/DD/YYYY) 01/31/2018	Amount \$250.00
Full Name of Contributor Mark Lewis			Registration Number, if PAC	
Street Address 445 Hutchinson Ave., Ste 100		Employer/Occupation/Labor Organization* Kittrick, Lewis & Harris Co., LPA		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43235	Date (MM/DD/YYYY) 01/31/2018	Amount \$500.00
Full Name of Contributor Mark Kittrick			Registration Number, if PAC	
Street Address 60 E. Spring St. 601		Employer/Occupation/Labor Organization* Kittrick, Lewis & Harris Co., LPA		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	Date (MM/DD/YYYY) 01/31/2018	Amount \$500.00
Full Name of Contributor Sarah C. Huffman			Registration Number, if PAC	
Street Address 6824 Scioto Chase Blvd.		Employer/Occupation/Labor Organization* BNC		Form (Cash, Check, etc.) Check
City Powell	State OH	Zip Code 43065	Date (MM/DD/YYYY) 01/31/2018	Amount \$100.00
Full Name of Contributor G. Wayne West			Registration Number, if PAC	
Street Address 119 Amazon Place		Employer/Occupation/Labor Organization* Retired		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43214	Date (MM/DD/YYYY) 01/31/2018	Amount \$600.00

*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 also appear. [R.C. 3517.10(B)(4)]

Page Total \$1950.00