Page O

Statement of Contributions Received

Prescribed by Secretary of State 3/05

		•					•	
Name of Committee in Full								
Committee For Judge Patsy A. Thoma	S							
Full Name of Contributor					Registration Number, if PAC			
Cash for T-shirts sold at \$10 each								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Che	eck, etc.)
City	S	tate	Zip Code	M	D	Y	Amount	
				1 0	0 2	0 7		150.00
Full Name of Contributor						ber, if PA	C	
Pearl J. Clopton								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Che	eck, etc.)
2239 Watersedge Blvd.	, in the second						check	
City	S	tate	Zip Code	М	l D	ΙΥ	Amount	
Columbus	0	Н	43209	1 0	0 2	0 7		100.00
Full Name of Contributor			10207			ber, if PA	C	100.00
Edwin L. Malek				a de la constante de la consta		,	-	
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Che	eck etc.)
	Employer/Occupation/Labor Organization						check	
1227 South High Street	9	tate	Zip Code	М	D	ΙΥ	Amount	
Columbus	١ _	H	43206	. I .	I .		Allouit	160.00
Full Name of Contributor	LO	11	43200		0 2	<u> </u>	<u> </u>	100.00
				Registr	ation Num	iber, if PA	iC .	
James E. Arnold	Ir1.	10	··· //	<u> </u>			F (C . I . Cl.	-16->
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Che	eck, etc.)
3326 Foxcroft Drive			T				check	
City	١ ـ	tate	Zip Code	M	D	Y	Amount	050.00
Lewis Center	10	H	43035		0 2			250.00
Full Name of Contributor				Registra	ation Nun	ber, if PA	.C	
Douglas G. Borror								
Street Address	Employe	er/Occupa	ation/Labor Organization*				Form (Cash, Che	eck, etc.)
5500 Dublin Road							check	
City	Si	ate	Zip Code	М	D	Y	Amount	
Dublin	0	H	43017			$0 \mid 7$		250.00
Full Name of Contributor		,				ber, if PA	.C	
Plumbers & Pipefitters Local Union 189 PCE #6								
Street Address	Employe	г/Оссира	ation/Labor Organization*				Form (Cash, Che	eck, etc.)
1250 Kinnear Road							check	
City		ate	Zip Code	М	D	Y	Amount	
Columbus	0	H	43212	1 0	1 0	0 7		500.00
Full Name of Contributor	•					ber, if PA		
Margaret Reynolds								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Che	eck, etc.)
4789 Augustus Ct.							check	
City	St	ate	Zip Code	М	D	ΙΥ	Amount	
Hilliard	Lo	H	43026		1 0			25.00
Full Name of Contributor			10020			ber, if PA	C.	20.00
Elizabeth P. Kessler				1.56.511		, 24 * 1 *		
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Che	eck etc.)	
						check		
4633 Yantis Drive	State Zip Code M D					Y	Amount	
•	1 _	ate H	II =	1 .	D	1	AIIOUII	E00 00
New Albany	10		43054	1 0	10	0 7	C.1	500.00

Page Total \$ 1,935.00

^{*} 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)]