

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Dingus for Judge									
Full Name of Contributor Eric Hoffman						Registration Number, if PAC			
Street Address 2722 Bexley Park Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Bexley		State O H		Zip Code 43209		M 0	D 9	Y 1	Amount 50.00
Full Name of Contributor						Registration Number, if PAC			
Street Address N/A			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) N/A		
City N/A		State N A		Zip Code N/A		M 	D 	Y 	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address N/A			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) N/A		
City N/A		State N A		Zip Code N/A		M 	D 	Y 	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address N/A			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) N/A		
City N/A		State N A		Zip Code N/A		M 	D 	Y 	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address N/A			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) N/A		
City N/A		State N A		Zip Code N/A		M 	D 	Y 	Amount
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Full Name of Contributor						Registration Number, if PAC			
Street Address N/A			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) N/A		
City N/A		State N A		Zip Code N/A		M 	D 	Y 	Amount

* 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)]

Page Total \$ 50.00