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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Morehart for Judge Full Name of Contributor			In	d North	L. ICDA			
			1 *	Registration Number, if PAC $OH109$				
Vorys Sater Seymour & Pease LLP Street Address		antina // alan Oranainatia at	UF	1109		F (C1 - Ch1 - +-)		
	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)		
52 E. Gay St.	C4-4-	Zin Code	1 17	I D		Check		
	State H	Zip Code	M	D	Y	Amount	00	
Columbus Full Name of Contributor	OH	43215	0 1	1 9	1 7	2,500.	υυ	
	- I Ionahanan		Registra	tion Num	oer, 11 PA	C		
Hunter, Carnahan, Shoub, Byard & Street Address						Form (Cash, Check, etc.)		
	Employer/Occuj	pation/Labor Organization*						
3360 Tremont Rd., Suite 230		In: O i	- 1 ; .		·	Check		
City	State	Zip Code	M	D	Y	Amount	00	
Columbus	OH	43221	0 1	20	1 7	100.	<u>UU</u>	
Full Name of Contributor			Registra	tion Num	ber, if PA	С		
Bradley Frick and Associates, LLC								
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)		
1265 Neil Ave.					y-	Check		
City	State	Zip Code	M	D	Y	Amount		
Columbus	OH	43201	0 1	2 3	1 7	250.	.00	
Full Name of Contributor			Registra	tion Num	ber, if PA	С		
Cloppert, Latanick, Sauter & Wash	burn, LLP				_			
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Check, etc.)		
225 E. Broad St., 4th Flr.						Check		
City	State	Zip Code	M	D	Y	Amount		
Columbus	OH	43215	0 1	3 1	1 7	100.	.00	
Full Name of Contributor			Registra	tion Num	ber, if PA	С		
Jeffrey Berndt								
Street Address	Employer/Occu	pation/Labor Organization*				Form (Cash, Check, etc.)		
575 S. High St						Check		
City	State	Zip Code	М	D	Y	Amount		
Columbus	OH	43215	0 2	0 1	1 7	50.	.00	
Full Name of Contributor				tion Num				
Contributions from Form 31-E								
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*			_	Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount		
		•	0.2	0 2	1 7	6,310.	00	
Full Name of Contributor		——————————————————————————————————————	Registra	ation Num	ber, if PA	.C		
Bertha Duran Co., LPA			ľ		,			
Street Address	Employer/Occu	pation/Labor Organization*			_	Form (Cash, Check, etc.)		
52 W. Whittier St.	Zinpioyen Geea					Check		
City	State	Zip Code	М	D	Y	Amount		
	OH	43206	0 2	1		500.	ΩΩ	
Columbus Full Name of Contributor	10 11	1 43200		ation Num			.00	
			registi e		~~, # I A			
Lawrence Riehl Street Address	Employed/Occur	pation/Labor Organization*				Form (Cash, Check, etc.)		
	Lampioyei/Occu	panon/Labor Organization				Check		
500 S. High St., Suite 200		Zip Code	Тм	D	Y	Amount		
City	State O - H	1 '	1	I .			ሰሰ	
Columbus	OH	43215	0 2	1 7	1 5	250.	υU	

* 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 \$ 10,060.00