

Statement of Contributions Received -

Prescribed by Secretary of State 03/05

Name of Committee in Full GONZALES FOR JUDGE									
Full Name of Contributor XEVAIR BRAKAJ						Registration Number, if PAC			
Street Address 1736 FIFTH AVE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CASH		
City COLUMBUS			State OH		Zip Code 43212		M 09 D 17 Y 14		Amount 150⁰⁰
Full Name of Contributor Joseph ERB						Registration Number, if PAC			
Street Address 6332 Greenscape Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City Hilliard			State OH		Zip Code 43026		M 09 D 17 Y 14		Amount 25⁰⁰
Full Name of Contributor ESTHER M. BAKARIS						Registration Number, if PAC			
Street Address 488 FALLIS RD.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS			State OH		Zip Code 43214		M 09 D 17 Y 14		Amount 50⁰⁰
Full Name of Contributor THOMAS F. MORTELLO JR						Registration Number, if PAC			
Street Address 995 SHIGH ST			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS			State OH		Zip Code 43206		M 09 D 17 Y 14		Amount 150⁰⁰
Full Name of Contributor SUPOENA SERVICES PLUS LLC						Registration Number, if PAC			
Street Address PO BOX 126			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City GALLOWAY			State OH		Zip Code 43119		M 09 D 17 Y 14		Amount 50⁰⁰
Full Name of Contributor RICHARD DONAHEY						Registration Number, if PAC			
Street Address 495 S. HIGH ST			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS			State OH		Zip Code 43215		M 09 D 17 Y 14		Amount 150⁰⁰
Full Name of Contributor DEAN ADAM ANTIDIS						Registration Number, if PAC			
Street Address 2320 KENSINGTON DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS			State OH		Zip Code 43221		M 09 D 17 Y 14		Amount 200⁰⁰
Full Name of Contributor JAMES SRCARU						Registration Number, if PAC			
Street Address 2320 KENSINGTON DR			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK		
City COLUMBUS			State OH		Zip Code 43221		M 09 D 17 Y 14		Amount 200⁰⁰

* 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)]