

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full GONZALES FOR JUDGE													
Full Name of Contributor Timothy Dougherty							Registration Number, if PAC						
Street Address 1308 WEST MOUND ST.				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OHIO		Zip Code 43223		M 06		D 11		Y 14		Amount 150⁰⁰	
Full Name of Contributor Joseph Keglewitch							Registration Number, if PAC						
Street Address 1281 Poppy Hills Drive				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City BLACK LICK		State OHIO		Zip Code 43004		M 06		D 26		Y 14		Amount 500⁰⁰	
Full Name of Contributor DANIEL CARSON							Registration Number, if PAC						
Street Address 5606 Forest Glen Dr.				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City GROVE CITY		State OHIO		Zip Code 43123		M 06		D 26		Y 14		Amount 100⁰⁰	
Full Name of Contributor PROBST LAW OFFICE							Registration Number, if PAC						
Street Address 85 E. GAY ST., STE 608				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OHIO		Zip Code 43215		M 06		D 26		Y 14		Amount 100⁰⁰	
Full Name of Contributor GERRITY & BURRIER LTD							Registration Number, if PAC						
Street Address 400 S. FIFTH ST., STE 302				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OHIO		Zip Code 43215		M 06		D 26		Y 14		Amount 150⁰⁰	
Full Name of Contributor John H. BATES							Registration Number, if PAC						
Street Address 495 S. HIGH ST, STE 400				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OHIO		Zip Code 43215		M 06		D 26		Y 14		Amount 150⁰⁰	
Full Name of Contributor H. DOUGLAS TALBOT							Registration Number, if PAC						
Street Address 8020 Flint Run Place				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OHIO		Zip Code 43225		M 06		D 26		Y 14		Amount 250⁰⁰	
Full Name of Contributor Subpoena Services PLUS LLC							Registration Number, if PAC						
Street Address P.O. BOX 126				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City GALLOWAY		State OHIO		Zip Code 43119		M 06		D 26		Y 14		Amount 150⁰⁰	

* 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 \$ **1550⁰⁰**