

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Nelson for Judge							
Full Name of Contributor William Creedon					Registration Number, if PAC		
Street Address 2087 Kentwell Road		Employer/Occupation/Labor Organization* Scott, Scriven & Wahoff			Form (Cash, Check, etc.) check		
City Upper Arlington	State O H	Zip Code 43221	M 1 0	D 2 4	Y 1 4	Amount 100.00	
Full Name of Contributor LJ Etheridge					Registration Number, if PAC		
Street Address 3668 Medbrook Way		Employer/Occupation/Labor Organization* Organic Technologies			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43214	M 1 0	D 2 0	Y 1 4	Amount 50.00	
Full Name of Contributor Douglas Wittig					Registration Number, if PAC		
Street Address 39 S. Ardmore		Employer/Occupation/Labor Organization* Lucent Technologies			Form (Cash, Check, etc.) check		
City Bexley	State O H	Zip Code 43209	M 1 0	D 2 6	Y 1 4	Amount 25.00	
Full Name of Contributor Vincent Holzhall					Registration Number, if PAC		
Street Address 2834 Dale Ave		Employer/Occupation/Labor Organization* Steptoe & Johnston			Form (Cash, Check, etc.) check		
City Bexley	State O H	Zip Code 43209	M 1 0	D 2 6	Y 1 4	Amount 100.00	
Full Name of Contributor Jonathon Feibel					Registration Number, if PAC		
Street Address 363 S. Drexel		Employer/Occupation/Labor Organization* Cardinal Orthopedics			Form (Cash, Check, etc.) check		
City Bexley	State O H	Zip Code 43209	M 1 0	D 2 6	Y 1 4	Amount 200.00	
Full Name of Contributor Russell Sayre					Registration Number, if PAC		
Street Address 3609 Mound Way		Employer/Occupation/Labor Organization* Taft, Stettinius & Hollister			Form (Cash, Check, etc.) check		
City Cincinnati	State O H	Zip Code 45227	M 1 0	D 2 2	Y 1 4	Amount 250.00	
Full Name of Contributor George Molinsky					Registration Number, if PAC		
Street Address 1289 Crestwood Ave		Employer/Occupation/Labor Organization* Taft, Stettinius & Hollister			Form (Cash, Check, etc.) check		
City Cincinnati	State O H	Zip Code 45208	M 1 0	D 2 4	Y 1 4	Amount 250.00	
Full Name of Contributor James Zimmerman					Registration Number, if PAC		
Street Address 7655 Brill Road		Employer/Occupation/Labor Organization* Taft, Stettinius & Hollister			Form (Cash, Check, etc.) check		
City Cincinnati	State O H	Zip Code 45243	M 1 0	D 2 3	Y 1 4	Amount 250.00	

* 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)]

Page Total \$ 1,225.00