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## Statement of Contributions Received

Prescribed by Secretary of State 3/05

NI CONTROL DE	····			<u></u>			
Name of Committee in Full							
Nelson for Judge Full Name of Contributor Registration Number of PAC							
				Registration Number, if PAC			
Judith Brachman	In		]			E (0.1.0)	
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
311 N. Drexel Ave.	retired				check		
City	State	Zip Code	М	D	Y	Amount	0=0.00
Columbus	OH	43209			$1 \mid 4$		250.00
Full Name of Contributor Registration Number, if PAC							
Chad Readler							
Street Address	Employer/Occupa				Form (Cash, Check, etc.)		
765 Park Street	Jones Da	ones Day				check	
City	State	Zip Code	М	D		Amount	
<u>Columbus</u>	0   H	43215	0 8	1 4	1 4		150.00
Full Name of Contributor	Registration Number, if PAC					C	
Robert Behal							
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
2531 Brentwood Rd.	Behal Law Group					check	
City	State	Zîp Code	М	D	Y	Amount	
Bexley	OH	43209	018	113	1   4		150.00
Full Name of Contributor	<del>*</del>	<u> </u>		·	ber, if PA	C	
Rebekah Alt							
Street Address						Form (Cash, Ch	eck, etc.)
2404 Bryden Rd.	The Bucl				check		
City	State	Zip Code	М	D	Y	Amount	
Bexley	OIH	43209	กเล	1 3	$1 \mid 4$	-	150.00
Full Name of Contributor			difference and the second	101-12- AUA	ber, if PA	C	100,00
lames Trout							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Ch	eck. etc.)
1021 Grandon	1	Sey Tec CW Aerotech Service				check	
City		Zip Code	М	D	Y	Amount	
Bexlev	OH	43209	0 8	1		Jilowii	150.00
Full Name of Contributor		10207					150.00
Full Name of Contributor Registration Number, if PAC Ruthie Newcomer							
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Ch	ack eta
	1					check	
2240 Coventry Road		self employed State Zip Code M D Y				Amount	
· ·	1	<b>'</b>		1		Į.	150.00
Columbus	0 H	43221			1 4		150.00
Full Name of Contributor			Registra	non Num	ber, if PA	C	
Mary Nelson	<b>1</b> =			··			
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)	
7900 Brill Road	retired_				check		
City	State	Zip Code	М	D,	Y	Amount	0.000.00
Cincinnati	OH	45243	0 9				0,000.00
Full Name of Contributor Registration Number, if PAC							
Zieger, Tigges & Little							
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
41 S. High Street	law firm				check		
City	State	Zip Code	М	D	Y	Amount	
Columbus	O H_	43215	06	0 9	1.4		1,000.00

\* 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 \$ 32,000.00