

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full David Young for Judge Committee							
Full Name of Contributor John H. Bates					Registration Number, if PAC		
Street Address 495 S High Street, Suite 400		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 4	D 2 8	Y 1 4	Amount 100.00	
Full Name of Contributor Brotherhood of Locomotive Engineers and Trainmen PAC Fund					Registration Number, if PAC C00099234		
Street Address 1370 Ontario St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Cleveland	State O H	Zip Code 44113	M 0 5	D 0 3	Y 1 4	Amount 200.00	
Full Name of Contributor Samuel H. Shamansky Co LPA					Registration Number, if PAC		
Street Address 523 S High St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 5	D 0 7	Y 1 4	Amount 1,000.00	
Full Name of Contributor Bob Hoving					Registration Number, if PAC		
Street Address 9071 Tartan Fields Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 0 5	D 1 6	Y 1 4	Amount 200.00	
Full Name of Contributor Joseph L Mas					Registration Number, if PAC		
Street Address 330 South High Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 5	D 2 4	Y 1 4	Amount 50.00	
Full Name of Contributor Charles D Underwood					Registration Number, if PAC		
Street Address 731 Fairway Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Whitehall	State O H	Zip Code 43213	M 0 5	D 2 4	Y 1 4	Amount 100.00	
Full Name of Contributor Robert Zavagno Jr					Registration Number, if PAC		
Street Address 29117 King Arthur Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westlake	State O H	Zip Code 44145	M 0 5	D 2 4	Y 1 4	Amount 200.00	
Full Name of Contributor Contributions from Form 31-E					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City 	State	Zip Code	M 0 5	D 0 8	Y 1 4	Amount 1,465.00	

* 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)]