

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Morehart for Judge													
Full Name of Contributor William Lazarow						Registration Number, if PAC							
Street Address 400 S. 5th St.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43215		M 0 6		D 2 2		Y 1 5		Amount 150.00	
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		D		Y		Amount	
		 				0 6		2 4		1 5		4,565.00	
Full Name of Contributor Rosemarie Welch						Registration Number, if PAC							
Street Address 3587 Greenville Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Lewis Center		State O H		Zip Code 43035		M 0 6		D 2 5		Y 1 5		Amount 150.00	
Full Name of Contributor Cap Clegg						Registration Number, if PAC							
Street Address 5334 McGinty Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Dublin		State O H		Zip Code 43017		M 0 6		D 2 5		Y 1 5		Amount 200.00	
Full Name of Contributor David Glisson						Registration Number, if PAC							
Street Address 7 Alban Mews			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City New Albany		State O H		Zip Code 43054		M 0 6		D 2 6		Y 1 5		Amount 50.00	
Full Name of Contributor Bradley Frick						Registration Number, if PAC							
Street Address 1265 Neil Ave.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43201		M 0 7		D 0 2		Y 1 5		Amount 100.00	
Full Name of Contributor Shari Stump						Registration Number, if PAC							
Street Address 4400 Deveron Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Grove City		State O H		Zip Code 43123		M 0 7		D 0 6		Y 1 5		Amount 75.00	
Full Name of Contributor Denise Mirman						Registration Number, if PAC							
Street Address 1320 Dublin Rd., Suite 101			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43215		M 0 7		D 1 3		Y 1 5		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 \$ 5,540.00