Page J

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Hummer for Judge Committee Full Name of Contributor				Registro	tion Numb	er if PA	C	
				icogistia	COLLINATE	· • 1, 11 1 / 1\	<u> </u>	
Mark E. Jurkovac	Employer	/Occurs	tion/Labor Organization*				Form (Cash, Check, etc.)	
Street Address	Employer	/ Оссира	HOID EADOL OF BAILLEAUGH				Check	
24 N. High St.		4	7in Codo	1 84	D	Y	Amount	
Callanda	Sta	te H	Zip Code	$\frac{1}{1}$	1	0 9	100.00	
Columbus	0	J. J.	43215	1 0	2 7 tion Numb	and the second		
Full Name of Contributor				Registra	tion inuint	er, II PA	C	
Daniel P. Melaragno	- Is ,	10	d	<u> </u>	***************************************		Form (Cash, Check, etc.)	
Street Address	Employer	/Occupa	tion/Labor Organization*					
61 Blenheim Rd.					1 . 1		Check	
City	Sta		Zip Code	M	D	Y	Amount	
Columbus	0	Н	43214	1 0	A STREET, STRE	0 9	50.00	
Full Name of Contributor				Registra	ition Numb	per, if PA	C	
Jacob A. Schlosser						***************************************		
Street Address	Employer	/Occupa	tion/Labor Organization*				Form (Cash, Check, etc.)	
4937 West Broad St.							Check	
City	Sta		Zip Code	М	D	Y	Amount	
Columbus	0	H	43228	1 0		0 9	100.00	
Full Name of Contributor				Registra	ition Numl	oer, if PA	С	
Mark Nesbit								
Street Address	Employe	:/Occupa	ntion/Labor Organization*				Form (Cash, Check, etc.)	
447 East Main Street, Suite 200							PayPal	
City	Sta	ite	Zip Code	М	D	Y	Amount	
Columbus	0	H	43215	1 0	2 7	0 9	250.00	
Full Name of Contributor					ation Num	None and the second	С	
James Gass								
Street Address	Employe	r/Occupa	ntion/Labor Organization*				Form (Cash, Check, etc.)	
P. O. Box 70							PayPal	
City	Sta	ate	Zip Code	M	D	Y	Amount	
Dandridge	T	Ν	37725	1 0	2 7	0 9	300.00	
Full Name of Contributor					ation Num			
Victor Merullo								
Street Address	Employe	r/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)	
772 South Front Street			ŭ				PayPal	
City	Sta	ate	Zip Code	М	D	Y	Amount	
Columbus		Н	43206	1	2 7	1		
Full Name of Contributor			10200		ation Num			
Michael Kersmarki						, -		
Street Address	Employe	r/Occurs	ation/Labor Organization*				Form (Cash, Check, etc.)	
	Limpioye	., coup	Davor Organization				PayPal	
6535 Steeplechase Drive	Sta	ate	Zip Code	M	D	Y	Amount	
City	1 .	L L	1	1 .	1 .	0 9	50.00	
Tampa	F	I)	33625	1 0	ation Num			
Full Name of Contributor				registr	ation inuffi	ooi, a FA		
Doug Rogers	- In 1	-/0-	etical/Cabas One				Form (Cash, Check, etc.)	
Street Address	Employe	r/Occupa	ation/Labor Organization*				I	
300 E. Naughten St.			17: 0.1	1 17	T 15	1 37	PayPal	
City		ate	Zip Code	M	D	Y	Amount	
Columbus	0	H	43215	1 0	2 7	0 9	100.00	

Page Total \$ 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)]