

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>CAMPBELL FOR JUDGE</b>									
Full Name of Contributor <b>Demetrius C. Campbell</b>						Registration Number, if PAC			
Street Address <b>266 Forest Ridge Drive</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck			
City <b>Killeen,</b>		State <b>TX</b>	Zip Code <b>78543</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>\$200.00</b>	
Full Name of Contributor <b>Maceo F. Smith</b>						Registration Number, if PAC			
Street Address <b>666 E. 120th Street</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck			
City <b>Cleveland</b>		State <b>OH</b>	Zip Code <b>44108</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>\$25.00</b>	
Full Name of Contributor <b>Charles Nabit</b>						Registration Number, if PAC			
Street Address <b>893 E. 11<sup>th</sup> AVE</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) cash			
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43211</b>		M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>\$20.00</b>	
Full Name of Contributor <b>Dr. E. Webb</b>						Registration Number, if PAC			
Street Address <b>15201 Stony Island</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ck			
City <b>Dolton</b>		State <b>IL</b>	Zip Code <b>60419</b>		M <b>1</b>	D <b>0</b>	Y <b>2</b>	Amount <b>\$100.00</b>	
Full Name of Contributor <b>Daniel Connor</b>						Registration Number, if PAC			
Street Address <b>208 E. Gay Street</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on-line			
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>\$25.00</b>	
Full Name of Contributor <b>Michelle Van Tine</b>						Registration Number, if PAC			
Street Address <b>188 Kelso Rd.</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on-line			
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43202</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>\$100.00</b>	
Full Name of Contributor <b>Delmarshae Sledge</b>						Registration Number, if PAC			
Street Address <b>2209 E. Gracew Street</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on-line			
City <b>Richmond</b>		State <b>VA</b>	Zip Code <b>23223</b>		M <b>1</b>	D <b>0</b>	Y <b>1</b>	Amount <b>\$95.00</b>	
Full Name of Contributor <b>Michele George</b>						Registration Number, if PAC			
Street Address <b>7261 Saddlewood Drive</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) on-line			
City <b>Westerville</b>		State <b>OH</b>	Zip Code <b>43081</b>		M	D	Y	Amount	

\* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$565.00**