

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Thomas Haves for Judge Committee							
Full Name of Contributor Stephen Doggette					Registration Number, if PAC		
Street Address 4975 Morris Ave., #3341		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Addison	State T X	Zip Code 75001	M 0 2	D 0 6	Y 1 4	Amount 20.00	
Full Name of Contributor E. Scott Shaw, Attorney at Law					Registration Number, if PAC		
Street Address 500 S. Front St., Suite 130		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 2	D 1 4	Y 1 4	Amount 100.00	
Full Name of Contributor Tom DeMaria					Registration Number, if PAC		
Street Address 1226 Parkway Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212	M 0 2	D 2 7	Y 1 4	Amount 600.00	
Full Name of Contributor 3/6/14 Fundraiser Amount from 31-E					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State 	Zip Code	M 0 3	D 0 6	Y 1 4	Amount 6,350.00	
Full Name of Contributor Vorvys, Sater, Sevmour & Pease, LLP - John Kulewicz					Registration Number, if PAC OH109		
Street Address 52 E. Gav St., PO Box 1008		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 3	D 1 0	Y 1 4	Amount 3,600.00	
Full Name of Contributor Whitney Tennesen					Registration Number, if PAC		
Street Address 481 Whitson Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0 3	D 1 3	Y 1 4	Amount 100.00	
Full Name of Contributor John Allison					Registration Number, if PAC		
Street Address 963 Dennison Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43201	M 0 3	D 1 3	Y 1 4	Amount 150.00	
Full Name of Contributor Lewis Dve, Attorney at Law					Registration Number, if PAC		
Street Address 555 S. 3rd St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Columbus	State O H	Zip Code 43215	M 0 3	D 1 3	Y 1 4	Amount 100.00	

* 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 \$ 11,020.00