1 04 0

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					Registration Number, if PAC				
IBEW PAC Voluntary Fund	1								
Street Address	Employer	Occupa (ntion/Labor Organization*				Form (Cash, Che	ck, etc.)	
900 Seventh St NW	ļ						Check		
City	Sta		Zip Code	M _.	D	Y	Amount		
Washington	D	C.	20001		119		<u> </u>	500.00	
Full Name of Contributor Registration Number, if PAC									
Bill Hedrick									
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Che	ck, etc.)	
535 W 1st Ave							Check		
City	Sta	ie	Zip Code	M	Ð	Y	Amount		
Columbus	0	Η_	43215	0 8	0 4	$1 \mid 4$	-	50.00	
Full Name of Contributor				Registra	ation Num	ber, if PA	C		
Richard C Pfeiffer Jr									
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Che	ck, etc.)	
238 E Royal Forest Blvd							Check		
City	Sta	e	Zip Code	М	D	Y	Amount		
Columbus	01	H	43214	018	014	1 4		100.00	
Full Name of Contributor	•					ber, if PA	C		
Carpenter Lipps & Leland LLP									
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Che	ck, etc.)	
280 N High St, Ste 1300							Check		
City	Sta	e	Zîp Code	М	D	Y	Amount		
Columbus	01	Н	43215	1018	0 4	1 4		200.00	
Full Name of Contributor			I			ber, if PA	С		
James Davidson									
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Che	ck, etc.)	
5163 Chaffinch Ct							Check		
City	Star	e	Zip Code	М	D	Y	Amount		
Dublin	lοι	Н	43017	1018	014	1 4		250.00	
Full Name of Contributor						ber, if PA	c		
Felix Wade									
Street Address	Employer	Оссира	tion/Labor Organization*				Form (Cash, Che	ck, etc.)	
778 Hawksbury Way	` `	-	-				Check		
City	Sta	e	Zip Code	М	D	Y	Amount .		
Powell	01	Н	43065	1018	014	1 4		250.00	
Full Name of Contributor			1 -5000	_		ber, if PA			
John F Hilt									
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Che	ck, etc.)		
3793 Broadway	1						Check		
City	Sta	e	Zip Code	М	D	Y	Amount		
Grove City	01	Н	43123	lots	111	1 4		250.00	
Full Name of Contributor Registration Number, if PA							c		
Columbus Franklin County AFL-CIO PCE									
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Che	ck, etc.)		
1545 Alum Creek Dr, 2nd Fl						Check	• •		
City	Sta	le .	Zip Code	М	D	Y	Amount		
Columbus		H	43209	018	I .	1 4		400.00	
COMMITTIONS Legisland for contributions from individuals over \$100 to statewide and gene	_ ,						<u> </u>	400.00	

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. It 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 \$ 2,000.00