

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 John F. Hilt					Registration Number, if PAC		
Street Address 3083 Columbus Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Grove City	State O H	Zip Code 43123	M 1	D 0	Y 1	Amount 100.00	
Full Name of Contributor Donald F. Kelch					Registration Number, if PAC		
Street Address 5216 Dierker Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 1	D 0	Y 1	Amount 250.00	
Full Name of Contributor Steven L. Heiser					Registration Number, if PAC		
Street Address 1687 Doone Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 1	D 0	Y 1	Amount 100.00	
Full Name of Contributor Joshua W Greenberg					Registration Number, if PAC		
Street Address 36 S Ardmore Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43209	M 1	D 0	Y 1	Amount 100.00	
Full Name of Contributor Peter L Coratola Jr					Registration Number, if PAC		
Street Address 37 W Bridge St, Ste 105		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 1	D 0	Y 1	Amount 100.00	
Full Name of Contributor Michael S Schiff					Registration Number, if PAC		
Street Address 233 Preston Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43209	M 1	D 0	Y 1	Amount 1,000.00	
Full Name of Contributor Ohioans for Justice PAC					Registration Number, if PAC OH1308		
Street Address 2 Miranova Pl, #410		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1	D 0	Y 1	Amount 500.00	
Full Name of Contributor Dolly G Newhouse					Registration Number, if PAC		
Street Address 2674 Henthorne Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 1	D 0	Y 1	Amount 25.00	

* 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 \$ 2,175.00