

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Glaeden for Judge							
Full Name of Contributor James Winfree					Registration Number, if PAC		
Street Address 1260 Marlyn Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 0	Amount \$100.00	
Full Name of Contributor Jayne Brown					Registration Number, if PAC		
Street Address 246 Lansing St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Electronic Transfer		
City Columbus	State OH	Zip Code 43206	M 0	D 9	Y 0	Amount \$33.68	
Full Name of Contributor Steven Smith					Registration Number, if PAC		
Street Address 1375 Camelot Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 1	Amount \$100.00	
Full Name of Contributor Daniel Hilson					Registration Number, if PAC		
Street Address 4281 Olmsted Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City New Albany	State OH	Zip Code 43054	M 0	D 9	Y 1	Amount \$100.00	
Full Name of Contributor Bradley for Ohio					Registration Number, if PAC		
Street Address 260 N. Cassady Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 1	Amount \$500.00	
Full Name of Contributor Thomas Taneff Co., LPA					Registration Number, if PAC		
Street Address 250 Civic Center Dr., Suite 210		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 0	D 9	Y 1	Amount \$50.00	
Full Name of Contributor Donald Mason					Registration Number, if PAC		
Street Address 910 Center Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Zanesville	State OH	Zip Code 43701	M 0	D 9	Y 1	Amount \$100.00	
Full Name of Contributor Gerald Swedlow					Registration Number, if PAC		
Street Address 6049 Cranberry Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43213	M 0	D 9	Y 1	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 also appear. [R.C. 3517.10(B)(4)]