

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 Contributions from Form 31-E						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State 	Zip Code	M 0 7	D 1 1	Y 1 1	Amount 2,675.00	
Full Name of Contributor Contributions from Form 31-E						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State 	Zip Code	M 0 7	D 2 1	Y 1 1	Amount 2,525.00	
Full Name of Contributor Contributions from Form 31-E						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State 	Zip Code	M 0 8	D 1 0	Y 1 1	Amount 1,275.00	
Full Name of Contributor James L Sublett						Registration Number, if PAC	
Street Address 138 Old Country Lane		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Frankfort	State K Y	Zip Code 40601	M 0 8	D 1 5	Y 1 1	Amount 50.00	
Full Name of Contributor Contributions from Form 31-E						Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State 	Zip Code	M 0 8	D 1 8	Y 1 1	Amount 500.00	
Full Name of Contributor Robert Coletti						Registration Number, if PAC	
Street Address 1 E 4th St, Ste 1400		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Cincinnati	State O H	Zip Code 45202	M 0 8	D 2 9	Y 1 1	Amount 100.00	
Full Name of Contributor Andrew Cooke & Associates LLC						Registration Number, if PAC	
Street Address 243 N 5th Street		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43215	M 0 9	D 1 4	Y 1 1	Amount 150.00	
Full Name of Contributor Charles C Postelwaite						Registration Number, if PAC	
Street Address 5040 Riverside Dr, Ste 122		Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43221	M 0 9	D 2 6	Y 1 1	Amount 200.00	

* 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)]