## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full						
THE COMMITTEE TO ELECT DORK	RIS FOR JUI	DGE				
Full Name of Contributor				Number, if P	AC	
KEVIN DURKIN						
Street Address	Employer/Occi	apation/Labor Organization*			Form (Cash, Check, etc.)	
471 EAST BROAD ST, SUITE 1100	Zinproj en eccupancia Zince e igunicanon			CHECK 59		
City	State	Zip Code	M D	ΙΫ́	Amount	
COLUMBUS	OH		I . I .			
Full Name of Contributor	0 11	45215				
Full Name of Contributor  Registration Number, if PAC  JOSEPH BHAGAT						
	In 1 /0				D (0.1.61.1.4.)	
Street Address	Employer/Occi	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
5325 PORTLAND ST 3204					CHECK 2368	
City	State	Zip Code	M D	Y	Amount	
COLUMBUS	O   H	43235	0 6 1	4   0   6	50.00	
Full Name of Contributor Registration Number, if PAC						
CONTRIBUTIONS FROM FORM 31-E						
Street Address	Employer/Occi	ıpation/Labor Organization*			Form (Cash, Check, etc.)	
City	State	Zip Code	M D	Y	Amount	
			0 6 1	3 0 6	1,247.00	
Full Name of Contributor		l.	Registration N		A	
JOHN H. BATES, ESQ.			Ttogion and T	, umo vi, ii i i		
Street Address	Employer/Oag	pation/Labor Organization*			Form (Cash, Check, etc.)	
	Employer/Occi	ipation/Labor Organization				
495 S HIGH ST. SUITE 400		let e .	T 32 T =		CHECK 3786	
COLLINARIA	State	Zip Code	M D	Y	Amount	
COLUMBUS	O   H	43215		2 0 6		
Full Name of Contributor Registration Number, if PAC						
LABOERS INT'L UNION OF NA LOCAL 423 PAC FUND						
Street Address	Employer/Occu	pation/Labor Organization*			Form (Cash, Check, etc.)	
620 ALUM CREEK DR.					CHECK 1100	
City	State	Zip Code	M D	Y	Amount	
COLUMBUS	∣о∣н	43205	0 6 2	106	500.00	
Full Name of Contributor			Registration N			
KRAVITZ & KRAVITZ, LLC						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
145 E. RICH ST	Zinployen occupation Zubor Organization				CHECK 5001	
City	State	Zip Code	M D	Y	Amount	
	OH					
COLUMBUS	ТОТН	43213	0 7 0			
Full Name of Contributor			Registration N	lumber, if PA	AC	
LLOYD D. WILLIAMS		•				
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
6098 US ST RT 36E				CHECK 2665		
City	State	Zip Code	M D	Y	Amount	
GREENVILLE	O H	45331	0 7 0	7 0 6	200.00	
Full Name of Contributor			Registration N		AC	
BROOKS STICKEL						
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
325 WEST PARK DRIVE				CHECK 2574		
City	State	Zip Code	M D	Y	Amount	
GREENVILLE	O H	-	$\begin{bmatrix} 0 & 7 & 1 \end{bmatrix}$			
	υΠ	40001		7 0 6	25.00	

Page Total \$	2,322.00

<sup>\*</sup> 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)]