## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full Woods for Judge Committee				
Full Name of Contributor Richard A. Frye			Registration Number, if PAC	
Street Address 1669 Roxbury Road	Employer/Occupation/Labor Organization		<u>l</u>	Form (Cash, Check, etc.) Check
City Upper Arlington	State OH	Zip Code 43212	M D Y 0 2 0 6 1 4	Amount \$300.00
Full Name of Contributor Zeiger, Tigges & Little LLP	<u> </u>		Registration Number, if	PAC ,
Street Address 41 South High Street, Suite 3500	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	M D Y 0 2 0 4 1 4	Amount \$500.00
Full Name of Contributor  Vorys Sater Seymour and Pease LLP - Democratic PAC			Registration Number, if PAC OH109	
Street Address 52 East Gay Street, P. O. Box 1008	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	0 3 0 6 1 4	Amount \$3,600.00
Full Name of Contributor  J. Michael Houlahan	i.	· · · · · · · · · · · · · · · · · · ·	Registration Number, if I	PAC
Street Address 6774 Lakeside Circle West	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check
City Worthington	State OH	Zip Code 43085	0 3 1 7 1 4	Amount \$50.00
Full Name of Contributor  Teresa Gulick Registration Number, if PAC				
Street Address 1578 Chippewa Court	Employer/Occi	upation/Labor Organization		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	0 3 2 2 1 4	Amount \$100.00
Full Name of Contributor  Dennis D. Liston  Registration Number, if PAC				
Street Address 5234 Forest Run Drive	Employer/Occ	upation/Labor Organization*	• •	Form (Cash, Check, etc.) Check
City Dublin	State OH	Zip Code 43017	M D Y 0 3 2 0 1 4	Amount \$400.00
IBEW PAC Voluntary Fund			Registration Number, if C00027342	
Street Address 23 West Second Avenue		upation/Labor Organization ntary Fund		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43201	М D Y	Amount \$250.00
Full Name of Contributor  Kenneth B. Greenberger			Registration Number, if	
Street Address 725 N. Alfred St.	Employer/Occ	upation/Labor Organization		Form (Cash, Check, etc.) Check
City Alexandria	State VA	Zip Code 22314	M D Y 1 4	Amount \$50.00

<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 also appear. [R.C. 3517.10(B)(4)]