

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>MAS FOR JUDGE</b>									
Full Name of Contributor <b>Richard Gandarilla</b>						Registration Number, if PAC			
Street Address <b>840 Nob Hill Ct</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b>Gahanna</b>		State <b>OH</b>		Zip Code <b>43230</b>		M <b>0</b>		D <b>8</b>	
						Y <b>2007</b>		Amount <b>50<sup>00</sup>/<sub>xx</sub></b>	
Full Name of Contributor <b>Bill Hedrick</b>						Registration Number, if PAC			
Street Address <b>838 Thurbur Dr. W #22</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b>Cols</b>		State <b>OH</b>		Zip Code <b>43215</b>		M <b>0</b>		D <b>8</b>	
						Y <b>2507</b>		Amount <b>25<sup>00</sup>/<sub>xx</sub></b>	
Full Name of Contributor <b>Margaret Meckling</b>						Registration Number, if PAC			
Street Address <b>196 M Chase Ave</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Cols</b>		State <b>OH</b>		Zip Code <b>43204</b>		M <b>0</b>		D <b>8</b>	
						Y <b>2507</b>		Amount <b>25<sup>00</sup>/<sub>xx</sub></b>	
Full Name of Contributor <b>David Robinson</b>						Registration Number, if PAC			
Street Address <b>P.O. Box 8246</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Cds</b>		State <b>OH</b>		Zip Code <b>43201</b>		M <b>0</b>		D <b>8</b>	
						Y <b>2507</b>		Amount <b>50<sup>00</sup>/<sub>xx</sub></b>	
Full Name of Contributor <b>Greg Hoke</b>						Registration Number, if PAC			
Street Address <b>172 Mayfair Blvd</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Cols</b>		State <b>OH</b>		Zip Code <b>43213</b>		M <b>0</b>		D <b>8</b>	
						Y <b>3007</b>		Amount <b>70<sup>00</sup>/<sub>xx</sub></b>	
Full Name of Contributor <b>Mary Finke</b>						Registration Number, if PAC			
Street Address <b>4499 Loos Circle</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Cols</b>		State <b>OH</b>		Zip Code <b>43214</b>		M <b>0</b>		D <b>8</b>	
						Y <b>3107</b>		Amount <b>25<sup>00</sup>/<sub>xx</sub></b>	
Full Name of Contributor <b>Barbara Poppe</b>						Registration Number, if PAC			
Street Address <b>340 Clinton Heights Ave</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b>Cols</b>		State <b>OH</b>		Zip Code <b>43202</b>		M <b>0</b>		D <b>8</b>	
						Y <b>3107</b>		Amount <b>50<sup>00</sup>/<sub>xx</sub></b>	
Full Name of Contributor <b>Charna Sherman</b>						Registration Number, if PAC			
Street Address <b>3257 Belvoir <del>RD</del> Blvd</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>check</b>		
City <b><del>Cols</del> Beachwood</b>		State <b>OH</b>		Zip Code <b>41122</b>		M <b>0</b>		D <b>8</b>	
						Y <b>3007</b>		Amount <b>50<sup>00</sup>/<sub>xx</sub></b>	

\* 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)]

Page Total

**345.00**  
**\$0.00**