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1 450	

## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

		Programme (All Control			y fairing a child of a constant annual		
Name of Committee in Full							
Hummer for Judge Committee						7	
Full Name of Contributor			Kegistrat	non Numt	per, if PAC		
Kimberly Fiske	sus meganinan	**************************************		a di kanananan pagan baga			
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)	
7267 Lambton Green						PayPal	
City	State	Zip Code	М	D		Amount	
New Albany	OH	43054	0 9	2 9	0 9	75.00	
Full Name of Contributor			Registrat	tion Numl	ber, if PAC	C	
Patrick Merrill							
Street Address	Employer/Occup	oation/Labor Organization*	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Form (Cash, Check, etc.)	
5847 Via Susana						PayPal	
City	State	Zip Code	M	D	Y	Amount	
Riverside	$C \mid A$	92506	0 9	2 9	0 9	100.00	
Full Name of Contributor			announced announced annual section and the sec	The second secon	ber, if PA	CONTRACTOR OF THE PROPERTY OF	
James Mulhall			_				
Street Address	Employer/Occur	oation/Labor Organization*	L	Control courses (see See See See		Form (Cash, Check, etc.)	
3143 Wareham Rd.	Employer/Occupation/Labor Organization					PayPal	
City	State	Zip Code	M	D	Y	Amount	
	OH	43221	0 9	1 .	1	100.00	
Upper Arlington Full Name of Contributor			THE RESERVE AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE	CONTRACTOR OF THE PARTY OF THE	ber, if PA	CITOR CONTRACTOR AND	
B			regiona	on 1 tuill	, is t /1	~	
Kevin Bergen	Employar/Osa	oation/Labor Organization*		philipide massemphilipide de la compression de l		Form (Cash, Check, etc.)	
Street Address	Employer/Occup	vacion/Lauoi Organization*					
2906 Pickwick Drive		Trin C-1-	1 37	T 5	V	PayPal Amount	
City	State	Zip Code	M	D	Y		
Columbus	<u> </u>	43221	0 9			50.00	
Full Name of Contributor			Registra	ition Num	ber, if PA	L	
Contributions from Form 31-E				en de la companya de	***************************************		
Street Address	Employer/Occup	pation/Labor Organization*				Form (Cash, Check, etc.)	
				·			
City	State	Zip Code	М	D	Y	Amount	
			0 9	3 0	0 9	3,900.00	
Full Name of Contributor			Registra	ition Num	ber, if PA	.C	
Andrew J. Ruzicho							
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
118 Graceland Blvd., Apt. 307						PayPal	
City	State	Zip Code	M	D	Y	Amount	
Columbus	OH	43214	0/9	30	0 9	100.00	
Full Name of Contributor					iber, if PA		
Christopher Widing							
Street Address	Employer/Occur	pation/Labor Organization*			Militaria de la Mireri promundada de	Form (Cash, Check, etc.)	
1251 Kenbrook Hills Dr.	17			Check			
	State	Zip Code	M	D	Y	Amount	
Columbus	OH	3	0 9	1	$0 \mid 9$		
Columbus Full Name of Contributor		J TUZZU	CONTRACTOR OF THE PARTY OF THE	Maria Company of the	ber, if PA		
1			registr.	uii inuii	v., 11 FF		
Carol S. Kimball	Employ-10	nation/Labor Organization*		Washington Commonweal	MANAGEMENT CONTRACTOR	Form (Cash, Check, etc.)	
Street Address	Employer/Occupation/Labor Organization*		1				
1107 Summer Hill Circle			<del></del>	T =	1 17	Check	
City	State	Zip Code	M	D	Y	Amount	
Gahanna	O   H	43230	0 9	3 0	0 9	100.00	

Page Total \$ 4,525.00

<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)]