## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full	<del></del>					
David Young For Judge Committe	e					
Full Name of Contributor			Registration Number, if PAC			
Leo Zupan						
Street Address	Employer/Occi	pation/Labor Organization*				Form (Cash, Check, etc.)
6797 N. High Street Ste. 213						Check
City	State	Zip Code	М	D	Y	Amount
Worthington	OH	43085	0 5	1 3	1 1	25.00
Full Name of Contributor			Registra	tion Num	ber, if PA	.C
Barbara Sokol						
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
2346 Fishinger						Check
City	State	Zip Code	M	D	Y	Amount
Columbus	OH	43221	015	1 2	1 1	1 <u>00.00</u>
Full Name of Contributor			Registra	ition Num	ber, if PA	aC .
David J. Young						
Street Address	Employer/Occi	ipation/Labor Organization*				Form (Cash, Check, etc.)
365 Spring Branch Rd. SW						Check
City	State	Zip Code	M	D	Y	Amount
Supply	NC	28462	015	1   2	1 1 1	500.00
Full Name of Contributor	•		Registra	tion Num	ber, if PA	C
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount
Full Name of Contributor		<del></del>	Registra	tion Num	ber, if PA	C
Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check			Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount
City		2.1p C000	"		li	7 tilount
Full Name of Contributor			Registra	tion Num	ber, if PA	
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
	' '					
City	State	Zip Code	М	D	Y	Amount
		'				
Full Name of Contributor			Registra	ition Num	ber, if PA	C
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor			Registra	ttion Num	ber, if PA	AC .
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount
agricul for contributions from individuals over \$100 to statuvid a	<del>- 1</del>	01 10 11	<del>. ' . '</del>	<del></del>		

\* 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)]

Page Total \$	625.00
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