

# Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Glaeden for Judge</b>							
Full Name of Contributor <b>Vorys Sater Seymour and Pease LLP Advocates for Effective Gov't</b>					Registration Number, if PAC <b>OH108</b>		
Street Address <b>52 E. Gay Street, P.O. Box 1008</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M <b>1   0</b>	D <b>1   6</b>	Y <b>0   9</b>	Amount <b>2,000.00</b>	
Full Name of Contributor <b>Daniel G. Hilson</b>					Registration Number, if PAC		
Street Address <b>196 S. Grant Street, Suite 601</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M <b>1   1</b>	D <b>1   7</b>	Y <b>0   9</b>	Amount <b>200.00</b>	
Full Name of Contributor <b>Melissa R. Hoeffel</b>					Registration Number, if PAC		
Street Address <b>1443 Cliff Court</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43204</b>	M <b>1   1</b>	D <b>1   7</b>	Y <b>0   9</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Roetzel &amp; Andress</b>					Registration Number, if PAC		
Street Address <b>222 South Main Street</b>		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Akron</b>	State <b>O   H</b>	Zip Code <b>44308</b>	M <b>1   1</b>	D <b>1   7</b>	Y <b>0   9</b>	Amount <b>500.00</b>	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

\* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 2,800.00