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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full						
Hummer for Judge Committee			Daciet	tion N1	or ith	<u></u>
Full Name of Contributor Registration				uon nume	ber, ii PA	C
Gallagher, Gams, Pryor, Tallan & Littre		ti/I-1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		[Fa (Cash Chash at)
Street Address	Employer/Occupa	tion/Labor Organization*				Form (Cash, Check, etc.)
471 E. Broad St., 19th Floor		Tal a .		1 = 1		Check
City	State	Zip Code	M	D	Y	Amount
Columbus	O H	43215	1 0	all transportation and the second	0 9	75.00
Full Name of Contributor			Registra	tion Numb	oer, if PA	C
John Raphael	3		Mariana marian	oganica and and and and and and and and and an	managan da angang	
Street Address	Employer/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)
444 South Front St.				,		Check
City	State	Zip Code	M	D	Y	Amount
Columbus	$O \mid H$	43215	1 0	2 2	0 9	250.00
Full Name of Contributor			Registra	tion Numb	ber, if PA	С
James E. Hartley						
Street Address	Employer/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)
2975 Brandon Road						Check
City	State	Zip Code	M	D	Y	Amount
Columbus	O H	43221	1 0	2 2	0 9	100.00
Full Name of Contributor			Registra	ition Numl	ber, if PA	С
Ken Clark						
Street Address	Employer/Occupa	ation/Labor Organization*	_Section of the section of the secti	erodovane in du incomba	morning designation of the contraction of the contr	Form (Cash, Check, etc.)
57 E. Weber Rd.						Cash
City	State	Zip Code	M	D	Y	Amount
Columbus	$O \mid H$	43202	1 0	2 2	0 9	100.00
Full Name of Contributor		10202		tion Numl		
John L. Murphy					•	
Street Address	Employer/Occupa	ation/Labor Organization*				Form (Cash, Check, etc.)
490 Van Heyde Place						Check
City	State	Zip Code	M	D	ΙΥ	Amount
Columbus	OH	43209	1 0	1 .	0 9	2
Full Name of Contributor		TOZO7	and the second second	The second second second	and the second second	Annania marka ang kanana ang kana
Full Name of Contributor Pat Barker Registration Number, if PAC						
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)
1698 Berkshire Rd.	Lampioyen	ations baoon organization				PayPal
City	State	Zip Code	M	D	Y	Amount
	OH	43221	1	2 2	1	N .
Upper Arlington Full Name of Contributor	10 11	43221		1212 ation Num		
			Registra	mon num	bei, ii FA	
Earl, Warburton, Adams & Davis	In 1, 10	ation/Labor Organization*				Form (Cash, Check, etc.)
Street Address	Employer/Occupa	ation/Labor Organization*				
136 W. Mound St.	<u> </u>	Ia: 6.1	1		1 37	Check
City	State	Zip Code	M	D	Y	Amount
Columbus	OH	43215	1 0		0 9	100.00
Full Name of Contributor Registration Number, if PAC						
Richard S. Donahey	-		L	en management de la company		
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Check, etc.)
495 S. High St., Suite 100	<u> </u>					Check
City	State	Zip Code	M	D	Y	Amount
Columbus	OH	43215	1 0	2 3	0 9	100.00

Page Total \$	875.00
	675.00

^{*} 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)]