

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Bendig for Judge												
Full Name of Contributor Mark Brown						Registration Number, if PAC						
Street Address 83 Hanford Street			Employer/Occupation/Labor Organization* Attorney				Form (Cash, Check, etc.) check					
City Columbus		State O H		Zip Code 43206		M 0 9		D 92 6		Y 0 6		Amount 25.00
Full Name of Contributor Richard Borrer						Registration Number, if PAC						
Street Address 3036 Leeds Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check					
City Columbus		State O H		Zip Code 43221		M 0 8		D 1 6		Y 0 6		Amount 50.00
Full Name of Contributor Rita Altavioch						Registration Number, if PAC						
Street Address 337 Iswald			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check					
City Columbus		State O H		Zip Code 43202		M 0 8		D 2 7		Y 0 6		Amount 50.00
Full Name of Contributor Andrew Cecil						Registration Number, if PAC						
Street Address 495 S. High Street			Employer/Occupation/Labor Organization* Attorney				Form (Cash, Check, etc.) check					
City Coumbus		State O H		Zip Code 43215		M 0 8		D 3 0		Y 0 6		Amount 250.00
Full Name of Contributor Jim Wilcox						Registration Number, if PAC						
Street Address 1616 Gateway Circle			Employer/Occupation/Labor Organization* Attorney				Form (Cash, Check, etc.) cash					
City Grove City		State O H		Zip Code 43123		M 0 8		D 3 0		Y 0 6		Amount 50.00
Full Name of Contributor Mark Serrott						Registration Number, if PAC						
Street Address 789 Northwest Blvd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check					
City Columbus		State O H		Zip Code 43212		M 0 8		D 1 6		Y 0 6		Amount 50.00
Full Name of Contributor Kenneth Harris						Registration Number, if PAC						
Street Address 978 Vernon Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) check					
City Columbus		State O H		Zip Code 43209		M 0 8		D 3 0		Y 0 6		Amount 100.00
Full Name of Contributor Richard Topper						Registration Number, if PAC						
Street Address 5132 Olentangey River Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK					
City Columbus		State O O		Zip Code 43235		M 0 8		D 1 5		Y 0 6		Amount 150.00

* 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)]