

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Hummer for Judge Committee							
Full Name of Contributor Ian M. Baird					Registration Number, if PAC		
Street Address 1971 Scioto Pointe Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0	D 9	Y 0	Amount 250.00	
Full Name of Contributor Douglas for Judge Committee, c/o Thomas Bainbridge					Registration Number, if PAC		
Street Address 580 S. High Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0	D 9	Y 0	Amount 250.00	
Full Name of Contributor Craig Shanahan					Registration Number, if PAC		
Street Address 1974 Bedford Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal		
City Columbus	State O H	Zip Code 43212	M 0	D 9	Y 0	Amount 75.00	
Full Name of Contributor Contributions from Form 31-E					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M 0	D 9	Y 0	Amount 2,525.00	
Full Name of Contributor Lindsey M. Jump					Registration Number, if PAC		
Street Address 1227 W. 1st Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212	M 0	D 9	Y 0	Amount 575.00	
Full Name of Contributor John C. Mahaney Jr.					Registration Number, if PAC		
Street Address 50 W. Broad St., Room 200		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0	D 9	Y 1	Amount 150.00	
Full Name of Contributor Robin M. Sowry					Registration Number, if PAC		
Street Address 1435 Harlton Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0	D 9	Y 1	Amount 100.00	
Full Name of Contributor Stephen C. Fitch					Registration Number, if PAC		
Street Address 885 Robbins Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Worthington	State O H	Zip Code 43085	M 0	D 9	Y 1	Amount 200.00	

* 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)]

Page Total \$ 4,125.00