

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Ebner for Judge</b>													
Full Name of Contributor <b>David Axelrod</b>						Registration Number, if PAC							
Street Address <b>993 Landings Loop South</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>						
City <b>Westerville</b>		State <b>O   H</b>		Zip Code <b>43082</b>		M <b>0   9</b>		D <b>2   4</b>		Y <b>1   5</b>		Amount <b>100.00</b>	
Full Name of Contributor <b>Julie Saar</b>						Registration Number, if PAC							
Street Address <b>367 N. Columbia Ave</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>						
City <b>Columbus</b>		State <b>O   H</b>		Zip Code <b>43209</b>		M <b>1   0</b>		D <b>0   6</b>		Y <b>1   5</b>		Amount <b>36.00</b>	
Full Name of Contributor <b>Julia Dorrian</b>						Registration Number, if PAC							
Street Address <b>106 Montrose Way</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>						
City <b>Columbus</b>		State <b>O   H</b>		Zip Code <b>43214</b>		M <b>1   0</b>		D <b>1   5</b>		Y <b>1   5</b>		Amount <b>100.00</b>	
Full Name of Contributor <b>Benjamin Horn</b>						Registration Number, if PAC							
Street Address <b>268 Ashbourne Place</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Credit Card</b>						
City <b>Columbus</b>		State <b>O   H</b>		Zip Code <b>43209</b>		M <b>1   0</b>		D <b>1   3</b>		Y <b>1   5</b>		Amount <b>97.25</b>	
Full Name of Contributor <b>Jonathan Wolman</b>						Registration Number, if PAC							
Street Address <b>1149 Sleeping Meadow Drive</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Credit Card</b>						
City <b>New Albany</b>		State <b>O   H</b>		Zip Code <b>43054</b>		M <b>1   0</b>		D <b>1   4</b>		Y <b>1   5</b>		Amount <b>24.31</b>	
Full Name of Contributor <b>Jacquelyn Callender</b>						Registration Number, if PAC							
Street Address <b>1343 Waggoner Road</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Credit Card</b>						
City <b>Reynoldsburg</b>		State <b>O   H</b>		Zip Code <b>43068</b>		M <b>1   0</b>		D <b>1   6</b>		Y <b>1   5</b>		Amount <b>48.62</b>	
Full Name of Contributor <b>Beverly Corner</b>						Registration Number, if PAC							
Street Address <b>3589 Norwood Street</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Cash</b>						
City <b>Columbus</b>		State <b>O   H</b>		Zip Code <b>43224</b>		M <b>1   0</b>		D <b>1   3</b>		Y <b>1   5</b>		Amount <b>25.00</b>	
Full Name of Contributor <b>Roger Koeck</b>						Registration Number, if PAC							
Street Address <b>7100 N. High Street, Suite 307</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Cash</b>						
City <b>Worthington</b>		State <b>O   H</b>		Zip Code <b>43085</b>		M <b>1   0</b>		D <b>1   3</b>		Y <b>1   5</b>		Amount <b>50.00</b>	

\* 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 \$ 481.18