

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Hummer for Judge Committee									
Full Name of Contributor John S. Horan II						Registration Number, if PAC			
Street Address 2531 Q St. NW, Apt. 305			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Washington	State D	Zip Code C 20000	M 0	D 3	Y 1	Amount 50.00			
Full Name of Contributor Mark Obergfell						Registration Number, if PAC			
Street Address 658 Green Willow Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Fenton	State M	Zip Code O 63026	M 0	D 3	Y 1	Amount 100.00			
Full Name of Contributor Barry W. Epstein						Registration Number, if PAC			
Street Address 580 S. High St., Suite 130			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O	Zip Code H 43215	M 0	D 3	Y 1	Amount 25.00			
Full Name of Contributor Jacob Will						Registration Number, if PAC			
Street Address 2614 Edington Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O	Zip Code H 43215	M 0	D 3	Y 1	Amount 100.00			
Full Name of Contributor Glen A. Dugger						Registration Number, if PAC			
Street Address 1788 Coventry Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O	Zip Code H 43212	M 0	D 3	Y 1	Amount 50.00			
Full Name of Contributor Donald B. Leach Jr.						Registration Number, if PAC			
Street Address 191 W. Nationwide Blvd., Suite 300			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O	Zip Code H 43215	M 0	D 3	Y 1	Amount 250.00			
Full Name of Contributor William J. McLoughlin						Registration Number, if PAC			
Street Address 6221 Spring Run Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Westerville	State O	Zip Code H 43082	M 0	D 3	Y 1	Amount 200.00			
Full Name of Contributor Kenneth F. Grimes						Registration Number, if PAC			
Street Address 1899 McCoy Road			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O	Zip Code H 43220	M 0	D 4	Y 0	Amount 100.00			

* 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 \$ 875.00