Statement of Contributions Received at a Social Event or Fundraiser

Prescribed by Secretary of State 3/05

Name of Committee in Full: Gill for Judge				
Full Name of Contributor Hill Allison @ DeWeese, LL	.C	Registration Number, if PAC		
Street Address 7737 Olentangy River	Employer/Occupation/Organization		M D Y 9/22/2006	Amount \$250.00
City Columbus	State OH	Zip Code 43235	Form Check	
Full Name of Contributor Baker & Hostetler LLP		Registration Number, if PAC		
Street Address 3200 National City Center	Employer/Occupation/Organization		M D Y 9/22/2006	Amount \$500.00
City Cleveland	State OH	Zip Code 44114	Form Check	
Full Name of Contributor		Registration Number, if PAC		
Street Address	Employer/Occupation/Organization		MDY	Amount
City	State	Zip Code	Form	
Full Name of Contributor	<u> </u>	Registration Number, if PAC		
Street Address	Employer/O	ccupation/Organization	MDY	Amount
City	State	Zip Code	Form	
Full Name of Contributor	·	Registration Number, if PAC		
Street Address	Employer/O	ccupation/Organization	MDY	Amount
City	State	Zip Code	Form	
Full Name of Contributor	·	Registration Number, if PAC		
Street Address	Employer/O	ccupation/Organization	MDY	Amount
City	State	Zip Code	Form	
Full Name of Contributor	<u> </u>	Registration Number, if PAC		
Street Address	Employer/Occupation/Organization		MDY	Amount
City	State	Zip Code	Form	
Full Name of Contributor		Registration Number, if PAC		
Street Address	Employer/Occupation/Organization		MDY	Amount
City	State	Zip Code	Form	

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\$7,350.00

0.00 \$637.11

Total expenditures this event:

Page Total: \$1,050.00