31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
David Young for Judge Committee							
Full Name of Contributor						**Registration Number, if PAC**	
Sheila F. Young							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
10025 Orchid Ridge Ln	Mother						Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Bonita Springs	FL	34135	02	15	11		100.00
Full Name of Contributor						**Registration Number, if PAC**	
Sheila F. Young							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
10025 Orchid Ridge Ln	Mother						Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Bonita Springs	FL	34135	02	15	11		100.00
Full Name of Contributor						**Registration Number, if PAC**	
Sheila F. Young							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
10025 Orchid Ridge Ln	Mother						Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Bonita Springs	FL	34135	02	15	11		1,000.00
Full Name of Contributor						**Registration Number, if PAC**	
Rourke & Blumenthal, LLP							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
495 S. High Street							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43215	03	06	11		100.00
Full Name of Contributor						**Registration Number, if PAC**	
Ron Plymale							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
111 W. Rich Street							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43215	03	06	11		250.00
Full Name of Contributor						**Registration Number, if PAC**	
Richard Termuhlen							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
495 Columbia Place							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43209	03	14	11		20.00
Full Name of Contributor						**Registration Number, if PAC**	
Kevin E. Griffith							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
2084 Tremont Road							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43221	03	14	11		100.00
Full Name of Contributor						**Registration Number, if PAC**	
Ronald D. Wyss							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
3686 C. R. 60							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Ada	OH	45810	03	14	11		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 $ 1,770.00