## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

				en management de proposition de la company de la compa				
Name of Committee in Full								
Hummer for Judge Committee		***************************************		T				
Full Name of Contributor			,	Registrat	tion Numb	er, if PA	Ų Ž	
Richard D. Brooks						omeonia de la compansión d		
Street Address	Employer/	Occupat	tion/Labor Organization*			,	Form (Cash, Checl	k, etc.)
2012 Andover Road							Check	
City	Stat		Zip Code	М	D		Amount	
Upper Arlington	0	Н	43212	$0 \mid 4$	0 6	0 9		100.00
Full Name of Contributor Registration Number, if PAC								
James M. Groner								
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Checl	k, etc.)	
567 Laurel Ridge Dr.							Check	
City	Stat	te	Zip Code	М	D	Y	Amount	
Gahanna	0	H	43230	0 4	0 6	0 9		100.00
Full Name of Contributor		kerommu tosamrum/co			tion Numl		C	
William A. Adams								
Street Address	Employer	/Occupa	tion/Labor Organization*	<u> </u>			Form (Cash, Chec	k, etc.)
2124 Yorkshire Road							Check	
City	Star	te	Zip Code	М	D	Y	Amount	
Columbus	0	Н	43221	0 4	0 6	0 9		100.00
Full Name of Contributor					tion Numl	STOREST STORES	.C	
Paul W. Kolodzik								
Street Address	Employer	/Occupa	tion/Labor Organization*	_L	***************************************		Form (Cash, Chec	k, etc.)
1108 Paxon Court	Employer/Occupation Dator Organization						Check	. ,
City	Sta	te.	Zip Code	M	D	Y	Amount	
1 -	0	Н	45305	1 .	0 6			50.00
Bellbrook Full Name of Contributor			1000			THE REAL PROPERTY AND ADDRESS OF THE PERSON NAMED IN COLUMN	C	50.00
Robert J. Behal Law Offices, LLC, c/o			tion/Labor Organization*			alegiejakegentjaankinegen	Form (Cash, Chec	k. etc.)
	Limpioyei	, cocupa					Check	,,
501 S. High Street	Sta	ıte	Zip Code	М	l D	Y	Amount	
Calamatana		Н	43215	1 .	1 .	1 .		250.00
Columbus		11	43213	0 4	and the state of t		THE RESIDENCE OF THE PARTY OF T	ZJU.UU
Full Name of Contributor Registration Number, if PAC								
Bailey Cavalieri, LLC, c/o Donald Paynter  Street Address Employer/Occupation/Labor Organization* Form (Cash, Check, etc.)								v etc )
Street Address	Employer/Occupation/Labor Organization*				Check			
10 West Broad Street, Suite 2100		.4.0	Tin Code	ТМ	T D	Y	Amount	
City	Sta		Zip Code		1	ì	R .	750.00
Columbus	0	11	43215		0 6			750.00
Full Name of Contributor				Registra	ation Num	uer, II PA	NC .	
Daniel Straub								-l. oto
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
6336 Westbrook Pl.				<del>-1</del>	7	1 7:	PayPal	
City	Sta		Zip Code	M	D	Y	Amount	400.00
Worthington		H	43085	0 4				100.00
Full Name of Contributor Registration Number, if PAC								
Price Law Firm								
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)			
555 City Park Avenue						· · · · · · · · · · · · · · · · · · ·	Check	
City	Sta		Zip Code	М	D	Y	Amount	400 0 -
Columbus	0	Н	43215	0 4	1 3	0 9		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 \$	1,550.00