

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Nelson for Judge							
Full Name of Contributor Tracey Puthoff					Registration Number, if PAC		
Street Address 7346 Ayers Road		Employer/Occupation/Labor Organization* Taft, Stettinius & Hollister			Form (Cash, Check, etc.) check		
City Cincinnati	State O H	Zip Code 45255	M 1 0	D 2 0	Y 1 4	Amount 500.00	
Full Name of Contributor Taft, Stettinius & Hollister Better Government Fund					Registration Number, if PAC OH1146		
Street Address 425 Walnut Street		Employer/Occupation/Labor Organization* PAC			Form (Cash, Check, etc.) check		
City Cincinnati	State O H	Zip Code 45202	M 1 0	D 2 3	Y 1 4	Amount 300.00	
Full Name of Contributor W Stuart Dornette					Registration Number, if PAC		
Street Address 329 Bishopsbridge Dr.		Employer/Occupation/Labor Organization* Taft, Stettinius & Hollister			Form (Cash, Check, etc.) check		
City Cincinnati	State O H	Zip Code 45255	M 1 0	D 2 4	Y 1 4	Amount 200.00	
Full Name of Contributor Michael Brumfield					Registration Number, if PAC		
Street Address 1079 S. Roosevelt Ave		Employer/Occupation/Labor Organization* Southside Motors			Form (Cash, Check, etc.) Cash		
City Bexley	State O H	Zip Code 43209	M 1 0	D 2 6	Y 1 4	Amount 50.00	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
Full Name of Contributor					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	

* 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)]