

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Morehart for Judge</b>							
Full Name of Contributor <b>Jeffrey Mackey</b>					Registration Number, if PAC		
Street Address <b>1538 Melrose Ave.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43224</b>	M <b>0   9</b>	D <b>1   4</b>	Y <b>1   5</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Jon Saia</b>					Registration Number, if PAC		
Street Address <b>713 S. Front St.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43026</b>	M <b>0   9</b>	D <b>1   5</b>	Y <b>1   5</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Contributions from Form 31-E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b> </b>	Zip Code	M <b>0   9</b>	D <b>1   7</b>	Y <b>1   5</b>	Amount <b>2,000.00</b>	
Full Name of Contributor <b>Jo Anne Lvle</b>					Registration Number, if PAC		
Street Address <b>1600 Pontious Rd.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Circleville</b>	State <b>O   H</b>	Zip Code <b>43113</b>	M <b>0   9</b>	D <b>1   8</b>	Y <b>1   5</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Linda Mosbacher</b>					Registration Number, if PAC		
Street Address <b>6381 Clark State Rd.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Gahanna</b>	State <b>O   H</b>	Zip Code <b>43230</b>	M <b>0   9</b>	D <b>2   1</b>	Y <b>1   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>Melissa Fuhrmann</b>					Registration Number, if PAC		
Street Address <b>1849 Willoway Cir. N.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43220</b>	M <b>0   9</b>	D <b>2   4</b>	Y <b>1   5</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>Contributions from Form 31-E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State <b> </b>	Zip Code	M <b>1   0</b>	D <b>0   1</b>	Y <b>1   5</b>	Amount <b>1,090.00</b>	
Full Name of Contributor <b>Lisa Stefanelli</b>					Registration Number, if PAC		
Street Address <b>3186 Miriam Dr. N.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43204</b>	M <b>1   0</b>	D <b>0   8</b>	Y <b>1   5</b>	Amount <b>50.00</b>	

\* 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 \$ 3,440.00