

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Re-Elect Judge Hummer						
Full Name of Contributor Carsonie's D & C Ohio LLC				Registration Number, if PAC		
Street Address 1725 W. Lane Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 6	Y 1	Amount \$250.00
Full Name of Contributor Jeffrey Thompson Co., LPA				Registration Number, if PAC		
Street Address 601 S. High Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 4	Y 2	Amount \$200.00
Full Name of Contributor Charles Postlewaite LLC				Registration Number, if PAC		
Street Address 3040 Riverside Dr., Suite 122		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 4	Y 2	Amount \$200.00
Full Name of Contributor Robert D. Marshall				Registration Number, if PAC		
Street Address 2760 Oakridge Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 6	Y 1	Amount \$100.00
Full Name of Contributor Joan Dugger				Registration Number, if PAC		
Street Address 1788 Coventry Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State DC	Zip Code 43212	M 0	D 6	Y 1	Amount \$100.00
Full Name of Contributor Charles M. Greenlee				Registration Number, if PAC		
Street Address 1641 Essex Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 6	Y 1	Amount \$75.00
Full Name of Contributor Helena Tzagournis				Registration Number, if PAC		
Street Address 2260 Northwest Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 6	Y 1	Amount \$75.00
Full Name of Contributor Darlene A. Adams				Registration Number, if PAC		
Street Address 2728 Coventry Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 6	Y 1	Amount \$50.00

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$1,050.00**