31-A
R.C. 3517.10

## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Re-Elect Judge Hummer		· · · · · · · · · · · · · · · · · · ·	_			
Full Name of Contributor  Jeffrey A. Berndt Attorney at Law			Registration Number, if PAC			
Street Address 575 S. High St	Employer/Occupa	ution/Labor Organization"		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M D Y 0 2 1 9 1 5	Amount \$250.00		
Full Name of Contributor Committee for Judge Brandt		Registration Number, if P	AC			
Street Address 865 Macon Alley	Employer/Occupa	ttion/Labor Organization		Form (Cash, Check, etc.) Check		
City Columbus	Stake OH	Zip Code 43206	0 2 2 1 1 5	Amount \$250.00		
Full Name of Contributor Daniel D. Connor				AC		
Street Address 1788 Lake Shore Dr.	Employer/Occupa	tion/Labor Organization		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43204	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Amount \$500.00		
Full Name of Contributor  Committee for Judge Pollitt						
Street Address 865 Macon Alley	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Cashiers Check		
City Columbus	Staire OH	Zip Code 43206	M D Y 0 2 3 1 5	Amount \$250.00		
Full Name of Contributor  Scott W. Schiff & Associates Co., LPA						
Street Address 115 W. Main St.	Employer/Occupa	tion/Labor Organization		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	0 2 2 5 1 5	Amount \$600.00		
Full Name of Contributor John J. Chester, Jr.		Registration Number, if PAC				
Street Address 4906 Riverside Drive	Employer/Occupa	tion/Labor Organization		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43220	M D Y Y 5	Amount \$250.00		
Full Name of Contributor  Jeffrey M. Lewis  Registration Number, if PAC						
Street Address 4474 Summit Ridge Rd.	Employer/Occupa	tion/Labor Organization		Form (Cash, Check, etc.) Check		
City Upper Arlington	Staje OH	Zip Code 43220	M D Y O 1 5	Amount \$100.00		
Full Name of Contributor Christopher L. Lardiere  Street Address Employer/Occupation/Labor Organization Form (Cash, Check, etc.)						
Street Address 5095 Breckenhurst Dr.	Employer/Occupa	Employer/Occupation/Labor Organization				
City Hilliard	State OH	Zip Code 43026	0 3 1 0 1 5	Amount \$100.00		

Page Total \$2,300.00

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)]