

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Woods for Judge Committee						
Full Name of Contributor W. Colleen Ogle				Registration Number, if PAC		
Street Address 1669 Roxbury Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43212	M 1	D 0	Y 1	Amount \$100.00
Full Name of Contributor John Gatiss				Registration Number, if PAC		
Street Address 293 Cross Wind Loop		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) credit card		
City Westerville	State OH	Zip Code 43081	M 1	D 0	Y 1	Amount \$50.00
Full Name of Contributor Bailey Cavalieri LLC Operating Account				Registration Number, if PAC		
Street Address 10 West Broad Street, Suite 2100		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43215	M 0	D 9	Y 2	Amount \$250.00
Full Name of Contributor Mark Greeley				Registration Number, if PAC		
Street Address 1113 Waverly Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) credit card		
City Tallahassee	State FL	Zip Code 32312	M 1	D 0	Y 2	Amount \$200.00
Full Name of Contributor Mellissia Fuhrmann				Registration Number, if PAC		
Street Address 1998 Willoway Court North		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43220	M 1	D 0	Y 2	Amount \$50.00
Full Name of Contributor James G. Ryan				Registration Number, if PAC		
Street Address 237 East College Avenue		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Westerville	State OH	Zip Code 43081	M 1	D 0	Y 1	Amount \$200.00
Full Name of Contributor M. Faye Spratley				Registration Number, if PAC		
Street Address 7940 Fairway Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check		
City Columbus	State OH	Zip Code 43235	M 1	D 0	Y 1	Amount \$100.00
Full Name of Contributor Artz, Dewhirst & Wheeler, LLP				Registration Number, if PAC		
Street Address 560 East Town Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 2	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)]