

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 The Meranda Law Firm				Registration Number, if PAC		
Street Address 33 W. Main St., Suite 205		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Newark	State OH	Zip Code 43055	M 0	D 4	Y 1315	Amount \$100.00
Full Name of Contributor John Gilligan				Registration Number, if PAC		
Street Address 250 West St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) PayPal	
City Columbus	State OH	Zip Code 43215	M 0	D 4	Y 2815	Amount \$250.00
Full Name of Contributor Eric Brehm				Registration Number, if PAC		
Street Address 604 E. Rich St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43215	M 0	D 5	Y 0715	Amount \$100.00
Full Name of Contributor Donald F. Kelch, Jr.				Registration Number, if PAC		
Street Address 5216 Dierker Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 5	Y 1215	Amount \$300.00
Full Name of Contributor IBEW PAC Voluntary Fund				Registration Number, if PAC		
Street Address 900 Seventh St., NW		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Washington	State DC	Zip Code 20001	M 0	D 5	Y 1415	Amount \$500.00
Full Name of Contributor Scott W. Schiff & Assoc. Co., LPA				Registration Number, if PAC		
Street Address 115 W. Main St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 5	Y 1915	Amount \$200.00
Full Name of Contributor Cheryl S. Godard				Registration Number, if PAC		
Street Address 1817 Lake Shore Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43204	M 0	D 6	Y 1815	Amount \$100.00
Full Name of Contributor David H. Thoms				Registration Number, if PAC		
Street Address 511 S. High Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 6	Y 1815	Amount \$400.00

* 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 **\$1,950.00**