

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full GONZALES FOR Judge													
Full Name of Contributor RICHARD F KRUSE							Registration Number, if PAC						
Street Address 117 LAKE Bluff Dr.				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OHIO		Zip Code 43235		M 05		D 23		Y 14		Amount 75.00	
Full Name of Contributor Francesca Tosi WARD							Registration Number, if PAC						
Street Address 1693 CARDIFF ROAD				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OHIO		Zip Code 43221		M 05		D 23		Y 14		Amount 75.00	
Full Name of Contributor MATT Huffman for State Representative							Registration Number, if PAC						
Street Address 421 South Cable Road				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City LIMA		State OHIO		Zip Code 45805		M 05		D 23		Y 14		Amount 300.00	
Full Name of Contributor Jeffrey M. Brown							Registration Number, if PAC						
Street Address 500 S. Front St, Ste 100				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OHIO		Zip Code 43215		M 05		D 23		Y 14		Amount 100.00	
Full Name of Contributor PAUL-MICHAEL LAFAYETTE							Registration Number, if PAC						
Street Address 10095 CORONA LN				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City PLAIN City		State OHIO		Zip Code 43064		M 05		D 23		Y 14		Amount 300.00	
Full Name of Contributor Stephanie Burrress McCloud							Registration Number, if PAC						
Street Address 912 ROSEHILL Rd.				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City REYNOLDSBURG		State OHIO		Zip Code 43068		M 05		D 23		Y 14		Amount 600.00	
Full Name of Contributor KERRY M. DONAHUE							Registration Number, if PAC						
Street Address 6295 Emerald Pkwy.				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City Dublin		State OHIO		Zip Code 43016		M 05		D 23		Y 14		Amount 150.00	
Full Name of Contributor Thomas P Pappas & Associates							Registration Number, if PAC						
Street Address 66 EAST Lynn Street				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK						
City COLUMBUS		State OHIO		Zip Code 43215		M 05		D 23		Y 14		Amount 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)]