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Statement of Contributions Received

Prescribed by Secretary of State 3/05

	•	-		·				
Name of Committee in Full								
Dingus for Judge					1 '011 4	C		
Full Name of Contributor				Registration Number, if PAC				
Proceeds from Fundraiser - '			***************************************					
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount		
City		1	1 0	0 1	0 8	4,955.94		
Full Name of Contributor			Registrat	ion Num	ber, if PA			
Street Address	ess Employer/Occupation/Labor Organization					Form (Cash, Check, etc.)		
Silver / radical/								
City	State	Zip Code	М	D	Y	Amount		
Full Name of Contributor		Registra	Registration Number, if PAC					
Pall Name of Controllor								
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount		
				ـــــــ	ļ.,,,			
Full Name of Contributor				Registration Number, if PAC				
Street Address	Employer/Occi	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)			
City	State	Zip Code	М	D	Y	Amount		
Full Name of Contributor			Registra	tion Nun	nber, if PA	AC		
Street Address	Employer/Occi	Employer/Occupation/Labor Organization*			1*			
				·				
City	State	Zip Code	M	D	Y	Amount		
				ــــــــــــــــــــــــــــــــــــــ	1			
Full Name of Contributor			Registra	tion Nun	nber, if P/	1 C		
Street Address	Employer/Occ	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City	State	Zip Code	М	D	Y	Amount		
		'						
Full Name of Contributor	Registra	Registration Number, if PAC						
Street Address	Employer/Occ	unation/Labor Organization	on*			Form (Cash, Check, etc.)		
Sheet Address	Limpio) vir occ	Employer/Occupation/Labor Organization*						
City	State	Zip Code	М	D	Y	Amount		
				<u> </u>	1			
Full Name of Contributor			Registra	ition Nur	nber, if Pa	AC		
Street Address	Employer/Occ	on*			Form (Cash, Check, etc.)			
City	State	Zip Code	М	D	Y	Amount		

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

Page Total \$ 4,955.94