

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full David Young for Judge Committee							
Full Name of Contributor Abe Bahgat Co LPA					Registration Number, if PAC		
Street Address 338 S High St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 2	D 0 9	Y 1 1	Amount 100.00	
Full Name of Contributor Tracy Allen Younkin					Registration Number, if PAC		
Street Address 495 S High St, Ste 200		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 2	D 0 9	Y 1 1	Amount 100.00	
Full Name of Contributor Contributions form Form 31-E					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
	 		1 2	0 6	1 1	8,670.00	
Full Name of Contributor John H Bates					Registration Number, if PAC		
Street Address 495 S High St, Ste 400		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 2	D 0 6	Y 1 1	Amount 100.00	
Full Name of Contributor Dennis W McNamara					Registration Number, if PAC		
Street Address 3966 Fairlington Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 1 2	D 0 6	Y 1 1	Amount 100.00	
Full Name of Contributor Nancy K Wonnell					Registration Number, if PAC		
Street Address 336 S High St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 2	D 0 6	Y 1 1	Amount 100.00	
Full Name of Contributor Columbus Franklin County AFL-CIO PCE					Registration Number, if PAC		
Street Address 1545 Alum Creek Drive, 2nd Fl		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43209	M 1 2	D 0 6	Y 1 1	Amount 250.00	
Full Name of Contributor Dennis P Evans					Registration Number, if PAC		
Street Address 4006 Lyon Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 1 2	D 0 6	Y 1 1	Amount 250.00	

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

Page Total \$ 9,670.00