

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full MAS FOR JUDGE COMMITTEE							
Full Name of Contributor MICHAEL HUNTER						Registration Number, if PAC	
Street Address 3360 TREMONT RD.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State OH	Zip Code 43221	M 10	D 12	Y 07	Amount 35.00	
Full Name of Contributor BERNARD Z. YAVITCH						Registration Number, if PAC	
Street Address 592 S. THIRD ST.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State OH	Zip Code 43215	M 10	D 17	Y 07	Amount 90.00	
Full Name of Contributor SHUTTENSTEIN ZOR & DUNN						Registration Number, if PAC OH 1310	
Street Address 250 WEST ST.			Employer/Occupation/Labor Organization* STATE & LOCAL PAC			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State OH	Zip Code 43215	M 10	D 18	Y 07	Amount 500.00	
Full Name of Contributor LOIS E. MARTINEZ						Registration Number, if PAC	
Street Address P.O. Box 550			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City ST. HELENA ISLAND	State OH S.C.	Zip Code 29920	M 10	D 19	Y 07	Amount 75.00	
Full Name of Contributor MICHAEL SHAWN DINGS						Registration Number, if PAC	
Street Address 213 POWHATTAN AVE.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State OH	Zip Code 43204	M 10	D 19	Y 07	Amount 200.00	
Full Name of Contributor HOWARD LOWE						Registration Number, if PAC	
Street Address 6835 AVERDON CT.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City REYNOLDSBURG	State OH	Zip Code 43068	M 10	D 22	Y 07	Amount 50.00	
Full Name of Contributor GUADALUPE VELASQUEZ						Registration Number, if PAC	
Street Address 1740 CANVASBACK LN			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS	State OH	Zip Code 43215	M 10	D 25	Y 07	Amount 75.00	
Full Name of Contributor E. DENNIS MUCHNICK						Registration Number, if PAC	
Street Address 270 CLOVER CT.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City DUBLIN	State OH	Zip Code 43017	M	D	Y	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)]