

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full GONZALES FOR JUDGE							
Full Name of Contributor MAQUIRE & SCHNEIDER LLP						Registration Number, if PAC	
Street Address 1650 LAKE Shore Dr.			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City COLUMBUS		State OHIO	Zip Code 43204		M 07	D 28	Y 14
						Amount 250.00	
Full Name of Contributor ROBERT FORTUNE SR.						Registration Number, if PAC	
Street Address 1814 RAY Avenue			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ON-LINE	
City BOSSIER CITY		State LA	Zip Code 71112		M 07	D 30	Y 14
						Amount 250.00	
Full Name of Contributor Jonathan Secrest						Registration Number, if PAC	
Street Address 4230 shelbourne Lane			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) ON-LINE	
City COLUMBUS		State OHIO	Zip Code 43220		M 08	D 14	Y 14
						Amount 100.00	
Full Name of Contributor BENESCH, FRIEDLANDER, Copland LPA						Registration Number, if PAC	
Street Address 41 S. HIGH ST, #2600			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City COLUMBUS		State OHIO	Zip Code 43220		M 08	D 15	Y 14
						Amount 300.00	
Full Name of Contributor MICHAEL GABRAIL						Registration Number, if PAC	
Street Address 5694 Loripat Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Broadview HEIGHTS		State OH	Zip Code 44147		M 08	D 15	Y 14
						Amount 500.00	
Full Name of Contributor SPECTRUM REPORTING LLC						Registration Number, if PAC	
Street Address 333 E. STEWART AVE			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS		State OHIO	Zip Code 43206		M 08	D 15	Y 14
						Amount 250.00	
Full Name of Contributor ANDERSON REPORTING SERVICES LLC						Registration Number, if PAC	
Street Address 3242 W. HENDERSON			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City COLUMBUS		State OHIO	Zip Code 43220		M 08	D 15	Y 14
						Amount 250.00	
Full Name of Contributor FRANK A. RAY						Registration Number, if PAC	
Street Address 89 E. NATIONWIDE BLVD			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK	
City COLUMBUS		State OH	Zip Code 43221		M 08	D 15	Y 14
						Amount 100.00	

* 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)]