

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Thomas Hayes for Judge Committee							
Full Name of Contributor George Curry					Registration Number, if PAC		
Street Address 1606 Carrigallen Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43228	M 0 9	D 1 9	Y 1 4	Amount 600.00	
Full Name of Contributor Roger Cline					Registration Number, if PAC		
Street Address 1550 Rathmell Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Lockbourne	State O H	Zip Code 43137	M 0 9	D 1 8	Y 1 4	Amount 200.00	
Full Name of Contributor Lewis Dye					Registration Number, if PAC		
Street Address 555 S. 3rd St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 9	D 1 1	Y 1 4	Amount 250.00	
Full Name of Contributor Mahlon Nowland					Registration Number, if PAC		
Street Address 820 Morning St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Worthington	State O H	Zip Code 43085	M 0 9	D 0 9	Y 1 4	Amount 100.00	
Full Name of Contributor Toure McCord: McCord Law Firm, LLC					Registration Number, if PAC		
Street Address 844 S. Front St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 0 9	D 0 2	Y 1 4	Amount 250.00	
Full Name of Contributor Jennifer Kearnery-Green					Registration Number, if PAC		
Street Address 1237 Broadview Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212	M 0 9	D 1 1	Y 1 4	Amount 150.00	
Full Name of Contributor Sandra Stansbury Myers					Registration Number, if PAC		
Street Address 1450 Mulford Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212	M 0 9	D 1 5	Y 1 4	Amount 25.00	
Full Name of Contributor Morgan Masters					Registration Number, if PAC		
Street Address 8158 Shannon Glen Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Dublin	State O H	Zip Code 43016	M 0 9	D 3 0	Y 1 4	Amount 55.00	

* 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 \$ 1,630.00