

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Glaeden for Judge						
Full Name of Contributor Jeffrey Berndt				Registration Number, if PAC		
Street Address 575 S. High St.		Employer/Occupation/Labor Organization* Attorney		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 0	D 3	Y 1	Amount \$250.00
Full Name of Contributor Stephen Buchenroth				Registration Number, if PAC		
Street Address 2342 Collins Dr.		Employer/Occupation/Labor Organization* Attorney		Form (Cash, Check, etc.) Check		
City Worthington	State OH	Zip Code 43085	M 0	D 3	Y 2	Amount \$150.00
Full Name of Contributor Nancy Monahan				Registration Number, if PAC		
Street Address 6151 Karrer Pl.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Dublin	State OH	Zip Code 43017	M 0	D 3	Y 2	Amount \$100.00
Full Name of Contributor Thomas Taneff				Registration Number, if PAC		
Street Address 600 S. High St., Suite 201		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 0	D 3	Y 2	Amount \$100.00
Full Name of Contributor Kravitz, Brown & Dortch, LLC				Registration Number, if PAC		
Street Address 65 E. State St., Suite 200		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 0	D 1	Y 1	Amount \$200.00
Full Name of Contributor Barney & Debrosse				Registration Number, if PAC		
Street Address 503 S. Front St., Suite 240B		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43215	M 0	D 1	Y 6	Amount \$150.00
Full Name of Contributor Stephanie McCloud				Registration Number, if PAC		
Street Address 912 Rosehill Rd.		Employer/Occupation/Labor Organization* Attorney		Form (Cash, Check, etc.) Check		
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 1	Y 2	Amount \$500.00
Full Name of Contributor Gregg Lewis				Registration Number, if PAC		
Street Address 625 City Park Ave.		Employer/Occupation/Labor Organization* Attorney		Form (Cash, Check, etc.) Check		
City Columbus	State OH	Zip Code 43206	M 0	D 4	Y 0	Amount \$108.00

* 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)]

Page Total **\$1,558.00**