

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Woods for Judge Committee					
Full Name of Contributor Nathan Gordon				Registration Number, if PAC	
Street Address 2485 East Broad Street		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) credit card	
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 1 0 1 0 1 4
				Amount \$50.00	
Full Name of Contributor Rayl Stepter				Registration Number, if PAC	
Street Address P. O. Box 1522		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) credit card	
City Dublin	State OH	Zip Code 43017	M 1	D 0	Y 1 0 1 3 1 4
				Amount \$100.00	
Full Name of Contributor Mildred E. Asmus				Registration Number, if PAC	
Street Address 850 Bluffview Drive		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43235	M 1	D 0	Y 1 0 1 4 1 4
				Amount \$100.00	
Full Name of Contributor Marc. D. Castle				Registration Number, if PAC	
Street Address 2700 Cox Mill Road		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Hopkinsville	State KY	Zip Code 42240	M 1	D 0	Y 1 0 1 1 1 4
				Amount \$100.00	
Full Name of Contributor Karen A. Cincione				Registration Number, if PAC	
Street Address 1228 Cambridge Blvd.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43212	M 1	D 0	Y 1 0 1 0 1 4
				Amount \$150.00	
Full Name of Contributor Philip R. Moots				Registration Number, if PAC	
Street Address 141 Webster Park Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43214	M 1	D 0	Y 1 0 1 3 1 4
				Amount \$100.00	
Full Name of Contributor Total Contributions from Form 31-E				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State	Zip Code	M 0	D 6	Y 3 0 1 4
				Amount \$8,225.00	
Full Name of Contributor Total Contributions from Form 31-E				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
City	State	Zip Code	M 0	D 7	Y 2 8 1 4
				Amount \$1,000.00	

* 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 **\$9,825.00**