

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Jay Perez for Judge Committee							
Full Name of Contributor Marlowe Turback						Registration Number, if PAC	
Street Address 1441 Midvale Ave			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) paypal	
City Los Angeles	State C A	Zip Code 90024	M 1	D 0	Y 2	Amount 350.00	
Full Name of Contributor Harry Panitch						Registration Number, if PAC	
Street Address 304 N Remington Rd			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) check	
City Bexley	State O H	Zip Code 43209	M 1	D 0	Y 2	Amount 50.00	
Full Name of Contributor Edwin Malek						Registration Number, if PAC	
Street Address 1227 South High			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43215	M 1	D 1	Y 0	Amount 130.00	
Full Name of Contributor Manju Jindal						Registration Number, if PAC	
Street Address 1401 Kinnards Place			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43235	M 1	D 0	Y 3	Amount 100.00	
Full Name of Contributor Gus Shihab						Registration Number, if PAC	
Street Address 6618 Traquir Pl			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) check	
City Dublin	State O H	Zip Code 43016	M 1	D 1	Y 0	Amount 500.00	
Full Name of Contributor Ahmad Akhras						Registration Number, if PAC	
Street Address 1311 Le Anne Marie Circle			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) check	
City Columbus	State O H	Zip Code 43235	M 1	D 1	Y 0	Amount 300.00	
Full Name of Contributor M.N. Tarazi						Registration Number, if PAC	
Street Address 147 East New England Ave			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) check	
City Worthington	State O H	Zip Code 43085	M 1	D 1	Y 0	Amount 100.00	
Full Name of Contributor Barakat Saleh						Registration Number, if PAC	
Street Address 941 Thornapple Grove			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) check	
City Galloway	State O H	Zip Code 43119	M 1	D 1	Y 0	Amount 250.00	

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 1,780.00