

Statement of Contributions Received at a Social Event or Fundraiser

Prescribed by Secretary of State 3/05

Name of Committee in Full: Gill for Judge				
Full Name of Contributor Kerry Boyle			Registration Number, if PAC	
Street Address 1959 Wickford Road	Employer/Occupation/Organization		M D Y 9/1/2006	Amount \$25.00
City Upper Arlington	State OH	Zip Code 43221	Form	
Full Name of Contributor Patrick Grady			Registration Number, if PAC	
Street Address 1455 W. 3rd Ave	Employer/Occupation/Organization		M D Y 9/1/2006	Amount \$25.00
City Columbus	State OH	Zip Code 43212	Form	
Full Name of Contributor Bob Palmer			Registration Number, if PAC	
Street Address 185 Rustic Place	Employer/Occupation/Organization		M D Y 9/1/2006	Amount \$100.00
City Columbus	State OH	Zip Code 43214	Form	
Full Name of Contributor Jim Underwood			Registration Number, if PAC	
Street Address 2273 Astor Ave	Employer/Occupation/Organization		M D Y 9/1/2006	Amount \$25.00
City Columbus	State OH	Zip Code 43209	Form	
Full Name of Contributor Jonathan Stonebraker			Registration Number, if PAC	
Street Address 9024 Lake Ridge Drive	Employer/Occupation/Organization		M D Y 9/1/2006	Amount \$25.00
City Lewis Center	State OH	Zip Code 43035	Form	
Full Name of Contributor Tim McGarity			Registration Number, if PAC	
Street Address 7708 Tillinghast Drive	Employer/Occupation/Organization		M D Y 9/1/2006	Amount \$25.00
City Dublin	State OH	Zip Code 43017	Form	
Full Name of Contributor Stephen Cambell			Registration Number, if PAC	
Street Address 8430 Lazelle Village Drive	Employer/Occupation/Organization		M D Y 9/1/2006	Amount \$25.00
City Lewis Center	State OH	Zip Code 43035	Form	
Full Name of Contributor Anonymous			Registration Number, if PAC	
Street Address	Employer/Occupation/Organization		M D Y 9/1/2006	Amount \$25.00
City	State	Zip Code 0	Form	

Total Contributions this event:

\$3,835.00

Total expenditures this event:

\$408.62

Page Total:
\$275.00