

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Glaeden for Judge					
Full Name of Contributor Robert J. Weiler, Jr.				Registration Number, if PAC	
Street Address 10 N. High St., Suite 401		Employer/Occupation/Labor Organization* Real Estate		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 8	Y 2 7 1 5
				Amount \$500.00	
Full Name of Contributor Michael Cope				Registration Number, if PAC	
Street Address 4549 Dirham Ln.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	M 0	D 9	Y 0 3 1 5
				Amount \$100.00	
Full Name of Contributor Randall Fischer				Registration Number, if PAC	
Street Address 855 Cherry Lane		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Bucyrus	State OH	Zip Code 44820	M 0	D 9	Y 0 3 1 5
				Amount \$100.00	
Full Name of Contributor Anubha Kulshrestha				Registration Number, if PAC	
Street Address 8089 Storrow Dr.		Employer/Occupation/Labor Organization* Jo Ann Fabrics		Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	M 0	D 9	Y 0 3 1 5
				Amount \$250.00	
Full Name of Contributor W Mark Jump LLC				Registration Number, if PAC	
Street Address 2130 Arlington Ave		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 8	Y 3 1 1 5
				Amount \$100.00	
Full Name of Contributor Douglas R Cole				Registration Number, if PAC	
Street Address 2545 Abington Rd.		Employer/Occupation/Labor Organization* Attorney		Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43221	M 0	D 8	Y 3 1 1 5
				Amount \$250.00	
Full Name of Contributor Cecil & Geiser LLC				Registration Number, if PAC	
Street Address 495 S. High St., Suite 400		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 9	Y 0 8 1 5
				Amount \$200.00	
Full Name of Contributor Chad Readler				Registration Number, if PAC	
Street Address 765 Park St.		Employer/Occupation/Labor Organization* Attorney		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 9	Y 0 8 1 5
				Amount \$200.00	

* 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 \$1,700.00