## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

V								- •	
Name of Committee in Full									
David Young for Judge Committee					In the standard Market (CDAC)				
Full Name of Contributor					Registration Number, if PAC				
Contributions from Form 31-E	Employed/Opporation (Cartes)								
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, C	neck, etc.)	
City		iate	Zip Code	М	D	Y	Amount		
Chy		1	Zap coac	015		111	, anomi	1,160.00	
Full Name of Contributor		<u> </u>				.C	1,100.00		
Full Name of Contributor  Stonewall Democrats of Central Ohio									
Street Address	Employe				Form (Cash, C	heck, etc.)			
545 E Town Street	,							, ,	
City	S	tate	Zip Code	<u>.</u>	D	Y	Check		
Columbus	lο	ΙH	43215	016	1 4	111		250.00	
Full Name of Contributor	10	<u> </u>	1 10-10		tion Num	ber, if PA	.c		
Leo Grimes									
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, C	heck, etc.)	
6823 Myrtlestone Street							Check		
City	S	iate	Zip Code	М	D	Y	Amount		
Dublin	10	H	43016	016	1 4	1 1		250.00	
Full Name of Contributor			<u> </u>	Registra	tion Num	ber, if PA	.C		
Contributions from Form 31-E									
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)				
City	Si	iate	Zip Code	М	D	Y	Amount		
		1		016	0 9	1   1		500.00	
Full Name of Contributor Registration Number, if PAC									
Linda L Myers									
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
133 Maplewood Dr							Check		
City	Si	tate	Zip Code	М	D	Y	Amount		
London	0	H	43140	016	2 2			100.00	
Full Name of Contributor				Registra	tion Num	ber, if PA	.c		
James P. Savage									
Street Address	Employer/Occupation/Labor Organization*			•			Form (Cash, Check, etc.)		
8127 Winchombe Dr			Int a r	1			Check		
City		tate   H	Zip Code	M	D	Y	Amount	250.00	
Dublin Full Name of Contributor	0	1 11	43016		2   2 tion Numi			250.00	
				Registia	HOII IAMII	Dei, II FA	ıc		
Contributions from Form 31-E  Street Address Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)				
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)		
City	- S	tate	Zip Code	М	D	Y	Amount .		
					l .	1 1		2,375.00	
0   6   1   5   1   1   Full Name of Contributor   Registration Number, if PAG							Ċ	2,070.00	
Christopher C. Young									
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, C	heck, etc.)	
301 Henry H Watters Drive							Check		
City	S	tate	Zip Code	М	D	Y	Amount		
Wilmington	N	I C	28412	016	310	1 1		100.00	
			•						

\* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 4,985.00