31-A
R.C. 3517.10

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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full						
Thomas Haves for Judge Committee						
Full Name of Contributor					Registration Number, if PAC	
Beatty for Judge						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
545 E. Town St.						Check
City	State	Zip Code	M	D	Y	Amount
Columbus	OH	43215	09	26	14	150.00
Full Name of Contributor					Registration Number, if PAC	
Summit Shaah						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
6268 Bellow Valley Dr.						Check
City	State	Zip Code	M	D	Y	Amount
Dublin	OH	43017	10	17	14	500.00
Full Name of Contributor					Registration Number, if PAC	
John Bates						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
495 S. High St., Ste. 400						Check
City	State	Zip Code	M	D	Y	Amount
Columbus	OH	43215	10	15	14	100.00
Full Name of Contributor					Registration Number, if PAC	
Karen Cincione						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
1228 Cambridge Blvd.						Check
City	State	Zip Code	M	D	Y	Amount
Columbus	OH	43212	10	13	14	300.00
Full Name of Contributor					Registration Number, if PAC	
Kris Dawley						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
2581 Brentwood Rd.						Check
City	State	Zip Code	M	D	Y	Amount
Columbus	OH	43209	10	16	14	100.00
Full Name of Contributor					Registration Number, if PAC	
Patrick Devine						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
296 N. Remington Rd.						Check
City	State	Zip Code	M	D	Y	Amount
Columbus	OH	43209	10	16	14	125.00
Full Name of Contributor					Registration Number, if PAC	
Hansel Rhee						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
4045 Holkham						Check
City	State	Zip Code	M	D	Y	Amount
New Albany	OH	43054	10	16	14	125.00
Full Name of Contributor					Registration Number, if PAC	
Victoria Powers						
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
291 Cassingham Rd.						Check
City	State	Zip Code	M	D	Y	Amount
Columbus	OH	43209	10	16	14	150.00

* 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 $ 1,550.00