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							
David Young for Judge Committee							
Full Name of Contributor						Registration Number, if PAC	
John P. Johnson Law Office, LLC							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
501 S. High Street							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	OH	43215	04	12	11		100.00
Full Name of Contributor						Registration Number, if PAC	
Dona Ferris							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
724 1/2 S. High St							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	OH	43206	04	12	11		100.00
Full Name of Contributor						Registration Number, if PAC	
Jeffrey L. Wilden							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
8970 Locherbie Court							Check
City	State	Zip Code	M	D	Y		Amount
Dublin	OH	43017	04	12	11		500.00
Full Name of Contributor						Registration Number, if PAC	
Sheila F. Young							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
10025 Orchard Ridge Lane	Mother						Check
City	State	Zip Code	M	D	Y		Amount
Bonita Springs	FL	34135	04	13	11		1,000.00
Full Name of Contributor						Registration Number, if PAC	
Bridgette C. Tupes							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
1400 Neil Ave, Apt C4							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	OH	43201	04	20	11		25.00
Full Name of Contributor						Registration Number, if PAC	
Zeiger, Tigges & Little LLP							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
41 South High Street, Suite 3500							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	OH	43215	04	20	11		100.00
Full Name of Contributor						Registration Number, if PAC	
Scott W. Schiff & Associates Co., LPA							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
115 W. Main St., Suite 100							Check
City	State	Zip Code	M	D	Y		Amount
Columbus	OH	43215	04	20	11		100.00
Full Name of Contributor						Registration Number, if PAC	
Jim Clark							
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
5945 Whittingham							Check
City	State	Zip Code	M	D	Y		Amount
Dublin	OH	43017	04	25	11		50.00

* 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 $ 1,975.00