Statement of Contributions Received

Prescribed by Secretary of State 3/05

						-
Name of Committee in Full						
Gwen Callender for Judge Full Name of Contributor			-			-
			Registration Number, if PAC			
Contributions from Form No. 31-E Street Address	Employer/Occ	upation/Labor Organization*				Form (Cash, Check, etc.)
prices variety	EmployenOcci	ipanon/Labor Organization				roim (Casi, Check, etc.)
City	State	Zip Code	М	D	Y	Amount
	1		018	217	113	1,200.00
Full Name of Contributor	•			ation Nun		
Contributions from Form No. 31-E						
Street Address	Employer/Occi				Form (Cash, Check, etc.)	
o:		la: a :	1	1		<u> </u>
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor			0 9		113	1,255.00
			Kegisu	ation Nur	10er, 11 PA	i.C
Contributions from Form No. 31-E Street Address	Employer/Occ	pation/Labor Organization*				Form (Cash, Check, etc.)
oueer Address	Linployer/occi				om (casi, check, cic.)	
City·	State	Zip Code	М	ΤD	ΙΥ	Amount
,			019	I .	113	
Full Name of Contributor	<u>'</u>			ation Num		
Contributions from Form No. 31-E						
Street Address Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)
City	State	Zip Code	М	D	Y	Amount
			1 0	1 5	1 3	300.00
Full Name of Contributor			Registr	ation Nur	iber, if PA	.c
		· · · · · ·				•
Street Address	Employer/Occi				Form (Cash, Check, etc.)	
o:		17. 6.1	1 1/	T 5	T v	[
City City	State	Zip Code	M	D I	Y	Amount
Full Name of Contributor			Registr	ation Nun	her if PA	
Full Name of Committodio			Registi	anon ivan	ioci, ii i z	
Street Address	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.)
	,	,				
City	State	Zip Code	М	D	Y	Amount
				1 1		
Full Name of Contributor		-	Registr	ation Nur	ber, if PA	.C
Street Address	Employer/Occi				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
Full Name of Contributor			Registr	ation Nun	iber, if PA	SC .
5	Employer/Occupation/Labor Organization*			_		Form (Cash, Check, etc.)
Street Address	Employer/Occi				голш (Casa, Check, etc.)	
Cin	State	Zip Code	М	D	ΙΥ	Amount
City	June	Δp couc	"	Ĭ	l i	
		<u> </u>			1 1	

Page Total \$ 4,965.00

^{*} 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)]