

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Glaeden for Judge					
Full Name of Contributor Gregg Lewis				Registration Number, if PAC	
Street Address 625 City Park Ave.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	M 0	D 1	Y 0 9 1 5
			Amount \$100.00		
Full Name of Contributor Maria Armstrong				Registration Number, if PAC	
Street Address 872 Pipestone Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43235	M 0	D 1	Y 6 1 5
			Amount \$150.00		
Full Name of Contributor Chad Readler				Registration Number, if PAC	
Street Address 765 Park St.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 1	Y 2 3 1 5
			Amount \$200.00		
Full Name of Contributor Kristen Watt				Registration Number, if PAC	
Street Address 4445 Castelon Rd. W.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	M 0	D 1	Y 2 3 1 5
			Amount \$150.00		
Full Name of Contributor Rick Boylan				Registration Number, if PAC	
Street Address 1976 Lake Shore Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43204	M 0	D 1	Y 2 3 1 5
			Amount \$100.00		
Full Name of Contributor George Kaitsa				Registration Number, if PAC	
Street Address 120 Olentangy Ridge Pl.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Powell	State OH	Zip Code 43065	M 0	D 1	Y 2 3 1 5
			Amount \$100.00		
Full Name of Contributor David Rieser				Registration Number, if PAC	
Street Address 2 Miranova Pl., Suite 710		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 1	Y 2 3 1 5
			Amount \$300.00		
Full Name of Contributor Vorys Sater Seymour & Pease PAC				Registration Number, if PAC OH108	
Street Address 52 E. Gay St., PO Box 1008		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 1	Y 2 3 1 5
			Amount \$2,500.00		

* 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 **\$3,600.00**