

Statement of Contributions Received at a Social Event or Fundraiser

Prescribed by Secretary of State 3/05

Name of Committee in Full: Gill for Judge				
Full Name of Contributor Carole Miller			Registration Number, if PAC	
Street Address 38 E. California Ave.	Employer/Occupation/Organization		M D Y 9/12/2006	Amount \$25.00
City Columbus	State OH	Zip Code 43202	Form Check	
Full Name of Contributor Eugene Matan			Registration Number, if PAC	
Street Address 261 S. Front Street	Employer/Occupation/Organization		M D Y 9/12/2006	Amount \$25.00
City Columbus	State OH	Zip Code 43215	Form Check	
Full Name of Contributor Bernard Baltz			Registration Number, if PAC	
Street Address 80 Webster Park Ave.	Employer/Occupation/Organization		M D Y 9/12/2006	Amount \$20.00
City Columbus	State OH	Zip Code 43214	Form Check	
Full Name of Contributor Cindy Ebner			Registration Number, if PAC	
Street Address 3455 E. Broad Street	Employer/Occupation/Organization		M D Y 9/12/2006	Amount \$30.00
City Columbus	State OH	Zip Code 43213	Form Check	
Full Name of Contributor Brett Jaffe			Registration Number, if PAC	
Street Address 844 S. Front Street	Employer/Occupation/Organization		M D Y 9/12/2006	Amount \$100.00
City Columbus	State OH	Zip Code 43206	Form Check	
Full Name of Contributor Mark McLeod			Registration Number, if PAC	
Street Address 471 E. Broad St; Ste 1900	Employer/Occupation/Organization		M D Y 9/12/2006	Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form Check	
Full Name of Contributor Rotley Black			Registration Number, if PAC	
Street Address 5685 Co. Rd. 25	Employer/Occupation/Organization		M D Y 9/12/2006	Amount \$50.00
City Cardtoning	State OH	Zip Code 43315	Form Cash	
Full Name of Contributor Dr. T.E. Simpson			Registration Number, if PAC	
Street Address 114 Heil Drive	Employer/Occupation/Organization		M D Y 9/12/2006	Amount \$50.00
City Gahanna	State OH	Zip Code 43230	Form Cash	

Total Contributions this event:

\$1,265.00

Total expenditures this event:

\$526.00

Page Total:
\$400.00