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**	
Chris Junga							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
8945 Ruin Hill Ct. N.							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Dublin	OH	43017	10	07	14		100.00
Full Name of Contributor						**Registration Number, if PAC**	
Robert Joseph							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
1406 Cambridge Blvd.							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43212	10	08	14		600.00
Full Name of Contributor						**Registration Number, if PAC**	
Nathan Akamine							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
844 S. Front St.							Check
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43206	10	15	14		100.00
Full Name of Contributor						**Registration Number, if PAC**	
Greg Quickel							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
8158 Shannon Glen Blvd.							Cash
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Dublin	OH	43016	10	09	14		20.00
Full Name of Contributor						**Registration Number, if PAC**	
James Roediger							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
1164 Lincoln Rd.							Paypal
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43212	09	09	14		75.00
Full Name of Contributor						**Registration Number, if PAC**	
George Ellis							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
1874 Bluff Ave.							Paypal
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43212	09	22	14		100.00
Full Name of Contributor						**Registration Number, if PAC**	
Chris Jagers							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
1543 Wyandotte Rd.							Paypal
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Columbus	OH	43212	09	23	14		75.00
Full Name of Contributor						**Registration Number, if PAC**	
Lowell Howard							
Street Address	**Employer/Occupation/Labor Organization***						**Form (Cash, Check, etc.)**
5095 Lakeview Dr.							Paypal
City	**State**	**Zip Code**	**M**	**D**	**Y**		**Amount**
Powell	OH	43065	10	02	14		250.00

* 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 $ 1,320.00