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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				
Artz Dewhirst & Wheeler LLP			Trogistia.		-w., # 1 A	-	
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck, etc.)
580 E Town St	Employer/Occupation/Labor Organization*				Check		
City	State	Zip Code	М	D	Y	Amount	
Columbus	O H	43215	$\begin{vmatrix} \mathbf{M} \\ 1 & 0 \end{vmatrix}$	2 9	1 4	2 MIOMIL	100.00
Full Name of Contributor	10 11	43213			ber, if PA		100.00
E Scott Shaw			Registra	non runn	ooi, n 171		
Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck etc.)
	Employer/Occupation/Labor Organization*			Check			
500 S Front St, Ste 130	State	Zip Code	Тм	D	Y	Amount	
	OH	43215	$\begin{bmatrix} 1 & 0 \end{bmatrix}$	2:9	1 4	a unount	150.00
Columbus Full Name of Contributor	10.11	43213				<u> </u>	150.00
· · · · · · · · · · · · · · · · · · ·							
Diane M Menashe CO LPA Street Address	Employer/Occurs	ation/Labor Organization*				Form (Cash, Che	ck etc.)
	Employer/Occup	actors Datoor Organizacion				Check	, 5.0./
536 S Wallt St	State	Zip Code	М	D	ΙΥ	Amount	
Columbus	OH	43215	1 0	2:9	1 4	, unoun	150.00
Full Name of Contributor	10	43213					150.00
Califf Bonding LLC Street Address	Employer/Occup	ation/Labor Organization*	<u> </u>			Form (Cash, Che	sck etc.)
	Employer	ation bacon Organization				Check	
350 S High St City	State	Zip Code	I M	D	Y	Amount	
Columbus	OH	43215	1 0		1.4	Lincoln	600.00
Full Name of Contributor	10 11	43213					000.00
Scott W Schiff & Associates Co LPA Street Address	Employer/Occupation/Labor Organization Form (Cash, Check, etc.)						
115 W Main St	Employer	ation bacor Organization				Check	
City	State	Zip Code	М	D	ΙΥ	Amount	
-	OH	43215	1 0	l	1 4	, uncount	750.00
Columbus Full Name of Contributor	10	43213				C	750.00
Thomas J O'Connell Co LPA Street Address	Employer/Occup	ation/Labor Organization*				Form (Cash, Che	ck. etc.)
	Zimpioyen Geoapi	actors Essecti Organization				Check	,
695 Bryden Rd City	State	Zip Code	М	D	Y	Amount	
Columbus	OH	43205	1	1	1 4		100.00
Full Name of Contributor		43203					100.00
Curry Roby & Mulvey Co LLC Street Address	Employer/Occurs	ation/Labor Organization*				Form (Cash, Che	ck, etc.)
30 Northwoods Blvd, Ste 300					Check		
City	State	Zip Code	М	D	Y	Amount	
Columbus	OH	43235	1 1	0 3	1 4		200.00
Full Name of Contributor	1 0 1	10200			ber, if PA	C	200.00
a un interior of Contacount							
Street Address	Employer/Occur	ation/Labor Organization*				Form (Cash, Che	ck, etc.)
50 50 7 10m 500	Campio, at Sacupation Enter to Semination						
City	State	Zip Code	М	D	Y	Amount	
Ony Control of the Co	State					I	
equired for contributions from individuals over \$100 to statewide and gene	eral assembly candi	I dates If contributor is self-empl	oved the c	ccupation	n and the	name of the	

* 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 \$	2,050.00