Statement of Contributions Received

Prescribed by Secretary of State 3/05

Date: 12/11/2006

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Name of Committee in Full: Gill for Judge						
Full Name of Contributor				Registration Number, if PAC		
Flatiron Fundraiser from form 31-E Street Address	Employer/Occupation/Organization				Form (Cash, Check, etc.)	
Surect Address	Employer, occupation, organization				Tom (cash, char, atal)	
City	State	Zip Code 0	M/D/Y 10/23/2006		\$4203.00	
Full Name of Contributor				Registration Number, if PAC		
Thomas Mitchell					Tr. vo v al v v	
Street Address 8605 Kirkhill Ct	Employer/Occupation/Organization				Form (Cash, Check, etc.) Check	
City	State	Zip Code	M/D/Y		CHECK	
Dublin	OH	43017	10/24/20	06	\$300.00	
Full Name of Contributor		Registra			on Number, if PAC	
Roberta Gill						
Street Address	Employer/Occupation/Organization				Form (Cash, Check, etc.)	
10517 Taylor Rd SW	State	Zip Code	M/D/Y		Check	
Reynoldsburg	OH	43068	10/24/20	06	\$1000.00	
Full Name of Contributor	1				on Number, if PAC	
Carpenters Local Union #200 PCE Entity #10288				#10288	·····	
Street Address	Employer/Occupation/Organization				Form (Cash, Check, etc.)	
1545 Alum Creek Drive	<u> </u>		T	~~~~	Check	
City Columbus	State OH	Zip Code 43209	M/D/Y 10/24/20	06	+250.00	
	On	73209	10/27/20		\$250.00	
Full Name of Contributor Registration Number, if PAC Allen Handlan						
Street Address	Employer/Occupation/Organization				Form (Cash, Check, etc.)	
2354 Kinsington Drive				Check		
City	State	Zip Code	M/D/Y			
Columbus	ОН	43221	10/26/20		\$25.00	
Full Name of Contributor					Registration Number, if PAC	
reet Address Employer/Occupation/Organization				<u> </u>	Form (Cash, Check, etc.)	
4062 Georgesville-Wrightsville Rd	Employer, occupation, organization				Check	
City	State	Zip Code	M/D/Y			
Grove City	ОН	43123	10/26/20	06	\$50.00	
Full Name of Contributor				Registration Number, if PAC		
Vorys, Sater Seymour & Pease LLP				#OH109	I Fame (Coath Charle ata)	
Street Address 52 E Gay StreetPO Box 1008	Employer/Occupation/Organization				Form (Cash, Check, etc.) Check	
City	State Zip Code M/D/Y				Oricek	
Columbus	ОН	43215	10/26/2006		\$500.00	
Full Name of Contributor OCSEA/AFSCME				Registration #LA292	legistration Number, if PAC	
Street Address	Employer/Occupation/Organization				Form (Cash, Check, etc.)	
390 Worthington Rd; Ste A					Check	
City	State	Zip Code	M/D/Y		4200.00	
Westerville	ОН	43082	10/26/2006		\$200.00	

Page Total: \$6,528.00

^{*} 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)]