

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Gwen Callender for Judge							
Full Name of Contributor Mallory Murphy					Registration Number, if PAC		
Street Address 506 Flintwood Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash		
City Gahanna	State O H	Zip Code 43230	M 0 2	D 2 6	Y 1 3	Amount 1.00	
Full Name of Contributor Mike McCann/Lycurgus Group LLC					Registration Number, if PAC		
Street Address 222 East Town Street, Fl 2W		Employer/Occupation/Labor Organization* Lycurgus Group/CEO			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 3	D 1 5	Y 1 3	Amount 500.00	
Full Name of Contributor Josh Engel/Lycurgus Group LLC					Registration Number, if PAC		
Street Address 222 East Town Street, Fl 2W		Employer/Occupation/Labor Organization* Lycurgus Group/Vice President			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 3	D 1 5	Y 1 3	Amount 500.00	
Full Name of Contributor Denise M Young					Registration Number, if PAC		
Street Address 117 Beech Drive		Employer/Occupation/Labor Organization* FOP of Ohio/Office Administrator			Form (Cash, Check, etc.) Check		
City Delaware	State O H	Zip Code 43015	M 0 3	D 2 3	Y 1 3	Amount 50.00	
Full Name of Contributor Mark A Scranton					Registration Number, if PAC		
Street Address 4230 Pekin Court		Employer/Occupation/Labor Organization* FOP/Ohio Labor Council/Staff Rep			Form (Cash, Check, etc.) Check		
City Batavia	State O H	Zip Code 45103	M 0 4	D 0 1	Y 1 3	Amount 100.00	
Full Name of Contributor Gregory Stewart					Registration Number, if PAC		
Street Address 8230 Lucas Pike		Employer/Occupation/Labor Organization* Superior Group/ CEO			Form (Cash, Check, etc.) Check		
City Plain City	State O H	Zip Code 43064	M 0 5	D 2 3	Y 1 3	Amount 100.00	
Full Name of Contributor Susan T Berlin					Registration Number, if PAC		
Street Address 13900 Shaker Blvd #1210		Employer/Occupation/Labor Organization* None/Retired			Form (Cash, Check, etc.) Check		
City Cleveland	State O H	Zip Code 44120	M 0 6	D 0 5	Y 1 3	Amount 100.00	
Full Name of Contributor FOP Lodge No 141 Committee for Public Safety					Registration Number, if PAC		
Street Address PO Box 805		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Youngstown	State O H	Zip Code 44501	M 0 6	D 0 5	Y 1 3	Amount 200.00	

* 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 \$ 1,551.00