



# Statement of Contributions Received

Form 31-A

ORC 3517.10

<b>Full Name of Committee</b> David Young for Judge Committee				
Full Name of Contributor Heidi Meade			Registration Number, if PAC	
Street Address 7867 Jefferson Dr.		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Credit Card
City Canal Winchester	State OH	Zip Code 43110	Date (MM/DD/YYYY) 11/19/2019	Amount 50.00
Full Name of Contributor Michael Schadek			Registration Number, if PAC	
Street Address 129 Arden Road		Employer/Occupation/Labor Organization* City of Columbus/Assistant Director		Form (Cash, Check, etc.) Credit Card
City Columbus	State OH	Zip Code 43214	Date (MM/DD/YYYY) 12/11/2019	Amount 50.00
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount
Full Name of Contributor			Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State	Zip Code	Date (MM/DD/YYYY)	Amount

\*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 also appear. [R.C. 3517.10(B)(4)]