

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Nelson for Judge							
Full Name of Contributor William Wahoff					Registration Number, if PAC		
Street Address 250 E. Broad Street, Ste. 900		Employer/Occupation/Labor Organization* Scott, Scriven & Wahoff			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43215	M 0	D 6	Y 11	Amount 100.00	
Full Name of Contributor Chris Coffin					Registration Number, if PAC		
Street Address 143 E. Whittier Street		Employer/Occupation/Labor Organization* Hilton Columbus Downtown			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43206	M 0	D 6	Y 11	Amount 50.00	
Full Name of Contributor Gregory Lashutka					Registration Number, if PAC		
Street Address 729 Mohawk Street		Employer/Occupation/Labor Organization* Findley Davies			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43215	M 0	D 6	Y 11	Amount 250.00	
Full Name of Contributor Donald Brey					Registration Number, if PAC		
Street Address 1280 Camelot Dr.		Employer/Occupation/Labor Organization* Taft, Stettinius & Hollister			Form (Cash, Check, etc.) check		
City Upper Arlington	State O H	Zip Code 43220	M 0	D 6	Y 11	Amount 300.00	
Full Name of Contributor Thomas Hayden					Registration Number, if PAC		
Street Address 2640 Sherwood Rd.		Employer/Occupation/Labor Organization* Wells Fargo			Form (Cash, Check, etc.) check		
City Bexley	State O H	Zip Code 43209	M 0	D 8	Y 11	Amount 150.00	
Full Name of Contributor James P. Garland					Registration Number, if PAC		
Street Address 2486 Bexley Park Rd.		Employer/Occupation/Labor Organization* retired			Form (Cash, Check, etc.) check		
City Bexley	State O H	Zip Code 43209	M 0	D 8	Y 11	Amount 250.00	
Full Name of Contributor P. Jonathan Meyer					Registration Number, if PAC		
Street Address 85 Stanbery Ave.		Employer/Occupation/Labor Organization* Stanbery Development			Form (Cash, Check, etc.) check		
City Bexley	State O H	Zip Code 43209	M 0	D 8	Y 11	Amount 100.00	
Full Name of Contributor Michael Gonsiorowski					Registration Number, if PAC		
Street Address 2666 Brentwood Rd.		Employer/Occupation/Labor Organization* PNC Bank			Form (Cash, Check, etc.) check		
City Bexley	State O H	Zip Code 43209	M 0	D 8	Y 11	Amount 100.00	

* 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)]