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Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Glaeden for Judge			_		
Full Name of Contributor Melissa Riggins			Registration Number, if P.	AC	
Street Address 406 Shale Ridge Ct.	Employer/Occupation/Labor Organization* Attorney		•	Form (Cash, Check, etc.) Check	
City Powell	State OH	Zip Code 43065	0 9 2 3 1 5	Amount \$350.00	
Full Name of Contributor Joseph Hollabaugh Jr.			Registration Number, if P.	AC	
Street Address 4475 Braithway St.	Employer/Occur	pation/Labor Organization	-	Form (Cash, Check, etc.) Check	
City Hilliard	State OH	Zip Code 43026	0 9 2 3 1 5	Amount \$50.00	
Full Name of Contributor Leah Pappas Porner		·	Registration Number, if P.	Registration Number, if PAC	
Street Address 2589 Sherwin Rd.	Employer/Occup	pation/Labor Organization		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	0 9 2 3 1 5	Amount \$100.00	
Full Name of Contributor Tammy Brown			Registration Number, if P.	AC	
Street Address 298 Linden Cir.	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Pickerington	State OH	Zip Code 43147	0 9 2 3 1 5	Amount , \$35.00	
Full Name of Contributor Kathy Clark			Registration Number, if P.		
Street Address 4520 Carriage Hill Ln.	Employer/Occup	pation/Labor Organization		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43220	0 9 2 3 1 5	Amount \$50.00	
Full Name of Contributor Stephen Tugend Registration				AC	
Street Address 260 N. Cassady	Employer/Occup	pation/Labor Organization	-	Form (Cash, Check, etc.) Electronic Transfer	
City Bexley	State	Zip Code 43209	0 9 2 4 1 5	Amount \$96.80	
Roy Gabbert			Registration Number, if P.	AC	
Street Address 301 N. Market St.	Employer/Occup Attorney			Form (Cash, Check, etc.) Electronic Transfer	
City West Union	Staje OH	Zip Code 45693	0 9 2 8 1 5	Amount \$572.59	
Full Name of Contributor Judge Lisa L Sadler Committee			Registration Number, if Pa		
Street Address 100 S. Third St.	Employer/Occup	pation/Labor Organization		Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	0 9 2 8 1 5	Amount \$250.00	

^{*} 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 also appear. [R.C. 3517.10(B)(4)]