

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee For Judge Patsy A. Thomas							
Full Name of Contributor Patsy A. Thomas					Registration Number, if PAC		
Street Address 5689 Plum Orchard		Employer/Occupation/Labor Organization* Municipal Court Judge			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43213	M 0 7	D 0 7	Y 0 7	Amount 500.00	
Full Name of Contributor Cynthia N. Callender					Registration Number, if PAC		
Street Address 1556 Garrywood Ave.		Employer/Occupation/Labor Organization* State Auditor's Office			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43227	M 0 8	D 3 1	Y 0 7	Amount 30.00	
Full Name of Contributor Jamie L. Thomas					Registration Number, if PAC		
Street Address 222 Parklawn Blvd. Apt. B		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43213	M 0 8	D 3 1	Y 0 7	Amount 10.00	
Full Name of Contributor Jonda E. Thomas					Registration Number, if PAC		
Street Address 1602 Omar Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43207	M 0 8	D 3 1	Y 0 7	Amount 20.00	
Full Name of Contributor Lucille Morris					Registration Number, if PAC		
Street Address 4981 Botsford Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43232	M 0 8	D 3 1	Y 0 7	Amount 20.00	
Full Name of Contributor George H. Hannah					Registration Number, if PAC		
Street Address 2460 Liston Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43207	M 0 8	D 3 1	Y 0 7	Amount 40.00	
Full Name of Contributor Charlesetta T. Dennington					Registration Number, if PAC		
Street Address 2616 Stacie Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43224	M 0 8	D 3 1	Y 0 7	Amount 40.00	
Full Name of Contributor Clara M. Thomas					Registration Number, if PAC		
Street Address 1220 Geers Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check		
City Columbus	State O H	Zip Code 43206	M 0 8	D 3 1	Y 0 7	Amount 30.00	

* 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 \$ 690.00