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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full					_					
Nelson for Judge										
Full Name of Contributor				Regio	trot:	on Mum	ber, if PA			
Frederick D. Nelson				Regis	uau	OII IVIIII	oci, ji FA			
Street Address	Employe	r/Oggung	stian/Labor Organization*	ــــــــــــــــــــــــــــــــــــــ				Form (Cash, Check, etc.)		
	Employer/Occupation/Labor Organization*							L		
310 S. Stanwood Rd.	candidate					<u> </u>	1 1/	check		
^{City} Columbus	O	ate H	Zip Code 43209	M	,	D	Y 1 1 4	Amount 1,000.00		
Full Name of Contributor		0 3 0 8 1 4 Registration Number, if PA								
Full Name of Contributor Registration Number, if PA Frederick D. Nelson OH108										
Street Address	Employer/Occupation/Labor Organization*						Form (Cash, Check, etc.)			
	PAC									
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Full Name of Contributor Registration Number, if PAC										
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C. II.V. CO 7						. !	1004			
Full Name of Contributor						Registration Number, if PAC				
Street Address	To be a second of the Commission					-		Form (Cash, Check, etc.)		
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Full Name of Contributor	<u> </u>		<u> </u>	Pagis	trati	on Num	ber, if PA	Č.		
run Name of Controllor				Regis	uan	1011 14 u 11	UC1, 11 1 7			
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Full Name of Controllor				Kegis	ou au	ion ivani	oci, ii rz	C		
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Section 19 and 1	Employer/Occupanoli Datos Organization							, , , , , , , , , , , , , , , , , , , ,		
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and for extending from individuals over \$100 to statewide and con-	٠.		datas. If contributar is salf amal			<u> </u>				

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. It 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 \$ 4,600.00