

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full GONZALES FOR Judge										
Full Name of Contributor Warren W. Seeley						Registration Number, if PAC				
Street Address 1020 Polaris Parkway #130						Employer/Occupation/Labor Organization*				
City Columbus						State OHIO		Zip Code 43240		Form (Cash, Check, etc.) check
						M 04		D 03		Y 14
						Amount 150⁰⁰				
Full Name of Contributor William # Petro Co.						Registration Number, if PAC				
Street Address 338 S High Street						Employer/Occupation/Labor Organization*				
City Columbus						State OHIO		Zip Code 43215		Form (Cash, Check, etc.) check
						M 04		D 03		Y 14
						Amount 300⁰⁰				
Full Name of Contributor Robert Behal						Registration Number, if PAC				
Street Address 2531 Brentwood Rd						Employer/Occupation/Labor Organization*				
City Bexley						State OHIO		Zip Code 43209		Form (Cash, Check, etc.) check
						M 04		D 03		Y 14
						Amount 600⁰⁰				
Full Name of Contributor Robert Mitchell						Registration Number, if PAC				
Street Address 2240 Pinebrook Rd						Employer/Occupation/Labor Organization*				
City Upper Arlington						State OHIO		Zip Code 43220		Form (Cash, Check, etc.) check
						M 04		D 03		Y 14
						Amount 200⁰⁰				
Full Name of Contributor Peter Binning						Registration Number, if PAC				
Street Address 592 S. Third Street.						Employer/Occupation/Labor Organization*				
City Columbus						State OHIO		Zip Code 43215		Form (Cash, Check, etc.) check
						M 04		D 03		Y 14
						Amount 50⁰⁰				
Full Name of Contributor Dennis Evans & Judi Hatcher						Registration Number, if PAC				
Street Address 4006 Lyon Dr.						Employer/Occupation/Labor Organization*				
City Columbus						State OHIO		Zip Code 43220		Form (Cash, Check, etc.) check
						M 04		D 03		Y 14
						Amount 100⁰⁰				
Full Name of Contributor Jack & Deborah D'aurora						Registration Number, if PAC				
Street Address 501 S. High Street						Employer/Occupation/Labor Organization*				
City Columbus						State OHIO		Zip Code 43215		Form (Cash, Check, etc.) check
						M 04		D 03		Y 14
						Amount 100⁰⁰				
Full Name of Contributor Lawrence Riehl						Registration Number, if PAC				
Street Address 500 S. Front St, STE 200						Employer/Occupation/Labor Organization*				
City Columbus						State OHIO		Zip Code 43215		Form (Cash, Check, etc.) check
						M 04		D 03		Y 14
						Amount 100⁰⁰				

* 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)]