

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Glaeden for Judge					
Full Name of Contributor Mary E. Yoder				Registration Number, if PAC	
Street Address 5177 Old Field Court		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
City Westerville		State OH	Zip Code 43082	M 1	D 0
				Y 1	Amount \$100.00
				4	5
Full Name of Contributor Patton Boggs Political Action Committee					
Street Address 2550 M. Street N.W.				Registration Number, if PAC	
City Washington		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
State DC		Zip Code 20037		M 1	D 0
				Y 1	Amount \$500.00
				4	5
Full Name of Contributor Gerald Duane Welsh					
Street Address 3792 Blue Water Ct.				Registration Number, if PAC	
City Powell		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
State OH		Zip Code 43065		M 1	D 0
				Y 1	Amount \$250.00
				4	5
Full Name of Contributor James E. Arnold & Associates LPA					
Street Address 115 W. Main St., Suite 400				Registration Number, if PAC	
City Columbus		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check	
State OH		Zip Code 43215		M 1	D 0
				Y 1	Amount \$600.00
				4	5
Full Name of Contributor Contributions from Form Number 31-E					
Street Address				Registration Number, if PAC	
City		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
State OH		Zip Code		M 0	D 5
				Y 1	Amount \$1,855.00
				4	5
Full Name of Contributor Contributions from Form Number 31-E					
Street Address				Registration Number, if PAC	
City		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
State OH		Zip Code		M 0	D 6
				Y 2	Amount \$1,500.00
				5	1
Full Name of Contributor Contributions from Form Number 31-E					
Street Address				Registration Number, if PAC	
City		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
State OH		Zip Code		M 0	D 8
				Y 2	Amount \$5,800.00
				7	1
Full Name of Contributor Contributions from Form Number 31-E					
Street Address				Registration Number, if PAC	
City		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
State OH		Zip Code		M 0	D 9
				Y 0	Amount \$1,485.00
				2	1
				5	

* 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)]