

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Glaeden for Judge						Registration Number, if PAC	
Full Name of Contributor Richard Boylan						Form (Cash, Check, etc.) Check	
Street Address 2957 N. Perch Row			Employer/Occupation/Labor Organization*			Amount	
City Port Clinton	State OH	Zip Code 43452	M 0	D 1	Y 2	Y 3	Y 1
Full Name of Contributor Scott & Nolder Co., LPA						Registration Number, if PAC	
Street Address 35 E. Livingston Ave.						Form (Cash, Check, etc.) Check	
City Columbus			Employer/Occupation/Labor Organization*			Amount	
State OH	Zip Code 43215	M 0	D 1	Y 2	Y 3	Y 1	Y 5
Full Name of Contributor Isaac Wiles Burkholder & Teetor, LLC						Registration Number, if PAC OH1058	
Street Address 2 Miranova Pl., Suite 700						Form (Cash, Check, etc.) Check	
City Columbus			Employer/Occupation/Labor Organization*			Amount	
State OH	Zip Code 43215	M 0	D 1	Y 2	Y 9	Y 1	Y 5
Full Name of Contributor Zeiger, Tigges & Little LLP						Registration Number, if PAC	
Street Address 41 South High St., Suite 3500						Form (Cash, Check, etc.) Check	
City Columbus			Employer/Occupation/Labor Organization*			Amount	
State OH	Zip Code 43215	M 0	D 1	Y 2	Y 9	Y 1	Y 5
Full Name of Contributor Levy & Associates						Registration Number, if PAC	
Street Address 4645 Executive Dr.						Form (Cash, Check, etc.) Check	
City Columbus			Employer/Occupation/Labor Organization*			Amount	
State OH	Zip Code 43220	M 0	D 2	Y 1	Y 3	Y 1	Y 5
Full Name of Contributor Nathan Mellman						Registration Number, if PAC	
Street Address 750 Clinton Pl.						Form (Cash, Check, etc.) Check	
City River Forest			Employer/Occupation/Labor Organization*			Amount	
State IL	Zip Code 60305	M 0	D 2	Y 2	Y 7	Y 1	Y 5
Full Name of Contributor Citizens for Cain						Registration Number, if PAC	
Street Address 5525 Sandy Dr.						Form (Cash, Check, etc.) Check	
City Lewis Center			Employer/Occupation/Labor Organization*			Amount	
State OH	Zip Code 43035	M 0	D 3	Y 0	Y 2	Y 1	Y 5
Full Name of Contributor Gregg Lewis						Registration Number, if PAC	
Street Address 625 City Park Ave.						Form (Cash, Check, etc.) Check	
City Columbus			Employer/Occupation/Labor Organization* Attorney			Amount	
State OH	Zip Code 43206	M 0	D 3	Y 1	Y 0	Y 1	Y 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)]