

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Glaeden for Judge						
Full Name of Contributor Andrew P. Avellano *					Registration Number, if PAC	
Street Address 1450 Broadview Avenue, Apt. 6		Employer/Occupation/Labor Organization Attorney			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43212	M 0 6	D 1 6	Y 0 5	Amount 50.00
Full Name of Contributor Contributions from Form 31-E					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount
			0 7	1 3	0 5	1,200.00
Full Name of Contributor Jeffrey G. Thompson Co. LPA					Registration Number, if PAC	
Street Address 601 S. High Street		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43215	M 0 8	D 3 1	Y 0 5	Amount 300.00
Full Name of Contributor Audrey K. Redmon					Registration Number, if PAC	
Street Address 4987 Sharon Hill Drive		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43235	M 0 9	D 3 0	Y 0 5	Amount 100.00
Full Name of Contributor Ohio & Vicinity Regional Council South Central Office PAC Fund					Registration Number, if PAC LA416	
Street Address 1394 Courtright Road		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43227	M 0 9	D 3 0	Y 0 5	Amount 250.00
Full Name of Contributor Carpenters Local Union #200					Registration Number, if PAC PCE10288	
Street Address 1545 Alum Creek Drive		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43209	M 0 9	D 3 0	Y 0 5	Amount 250.00
Full Name of Contributor Vorys Sater Seymour and Pease LLP Advocates for Effective Gov't					Registration Number, if PAC OH108	
Street Address 52 E. Gay Street		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check	
City Columbus	State O H	Zip Code 43215	M 1 0	D 0 3	Y 0 5	Amount 1,000.00
Full Name of Contributor					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount

* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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)

* Franklin County Court Appointee