

Statement of Contributions Received

Prescribed by Secretary of State 3/05

| | | | | | | | |
|--|-----------------------|---|-------------------|-----------------------|--|-------------------------|--|
| Name of Committee in Full Gwen Callender for Judge | | | | | | | |
| Full Name of Contributor Hershel Sigall | | | | | Registration Number, if PAC | | |
| Street Address 6161 Busch Blvd, Suite 130 | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Credit Card | | |
| City Columbus | State O H | Zip Code 43229 | M 0 4 | D 0 1 | Y 1 1 3 | Amount 50.00 | |
| Full Name of Contributor Jill Cole | | | | | Registration Number, if PAC | | |
| Street Address 680 North Lake Shore Drive, #1024 | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Credit Card | | |
| City Chicago | State I L | Zip Code 60611 | M 0 4 | D 1 1 | Y 1 1 3 | Amount 50.00 | |
| Full Name of Contributor Colleen Wenger | | | | | Registration Number, if PAC | | |
| Street Address 6231 Hampton Green Place | | Employer/Occupation/Labor Organization* Lancaster City Schools/Teacher | | | Form (Cash, Check, etc.) Credit Card | | |
| City Dublin | State O H | Zip Code 43016 | M 0 5 | D 0 4 | Y 1 1 3 | Amount 100.00 | |
| Full Name of Contributor Joe Hegedus | | | | | Registration Number, if PAC | | |
| Street Address 4981 Denbigh Ct | | Employer/Occupation/Labor Organization* OPBA/Attorney | | | Form (Cash, Check, etc.) Credit Card | | |
| City Columbus | State O H | Zip Code 43220 | M 0 5 | D 3 0 | Y 1 1 3 | Amount 100.00 | |
| Full Name of Contributor Marlin Languis | | | | | Registration Number, if PAC | | |
| Street Address 662 Latham Court | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Credit Card | | |
| City Columbus | State O H | Zip Code 43214 | M 0 6 | D 2 6 | Y 1 1 3 | Amount 35.00 | |
| Full Name of Contributor Sean Mentel | | | | | Registration Number, if PAC | | |
| Street Address 58 North 4th Street | | Employer/Occupation/Labor Organization* Self-employed/Attorney | | | Form (Cash, Check, etc.) Credit Card | | |
| City Columbus | State O H | Zip Code 43215 | M 0 7 | D 1 1 0 | Y 1 1 3 | Amount 500.00 | |
| Full Name of Contributor Jennifer Dillard | | | | | Registration Number, if PAC | | |
| Street Address 898 Chelsea Avenue | | Employer/Occupation/Labor Organization* | | | Form (Cash, Check, etc.) Credit Card | | |
| City Bexlev | State O H | Zip Code 43209 | M 0 7 | D 1 1 2 | Y 1 1 3 | Amount 25.00 | |
| Full Name of Contributor Donald J. McTigue | | | | | Registration Number, if PAC | | |
| Street Address 545 East Town Street | | Employer/Occupation/Labor Organization* McTigue & McGinnis/Attorney | | | Form (Cash, Check, etc.) Credit Card | | |
| City Columbus | State O H | Zip Code 43215 | M 0 8 | D 0 8 | Y 1 1 3 | Amount 100.00 | |

* 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 appear. [R.C. 3517.10(B)(4)]