

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Hummer for Judge Committee</b>							
Full Name of Contributor <b>Contributions from Form 31-E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
			0	8	2   0	0	9
					2,900.00		
Full Name of Contributor <b>Rebecca Gooch</b>					Registration Number, if PAC		
Street Address <b>336 S. High Street</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M	D	Y	Amount	
			0	8	2   0	0	9
					100.00		
Full Name of Contributor <b>Contributions from Form 31-E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
			0	8	2   2	0	9
					3,800.00		
Full Name of Contributor <b>Jeff Mackey</b>					Registration Number, if PAC		
Street Address <b>1538 Melrose Ave.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>PayPal</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43224</b>	M	D	Y	Amount	
			0	8	2   4	0	9
					200.00		
Full Name of Contributor <b>Franklin County Democratic Lawyers PAC</b>					Registration Number, if PAC <b>OH1164</b>		
Street Address <b>1141 S. High Street</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43206</b>	M	D	Y	Amount	
			0	8	2   7	0	9
					1,000.00		
Full Name of Contributor <b>Ohio Democratic party State Judicial Account</b>					Registration Number, if PAC		
Street Address <b>271 E. State Street</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M	D	Y	Amount	
			0	8	2   7	0	9
					200.00		
Full Name of Contributor <b>Nicholas Cavaleris</b>					Registration Number, if PAC		
Street Address <b>590 City Park Ave.</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>PayPal</b>		
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M	D	Y	Amount	
			0	8	2   7	0	9
					50.00		
Full Name of Contributor <b>Contributions from Form 31-E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount	
			0	8	2   8	0	9
					5,330.00		

\* 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)]