

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full David Young for Judge Committee							
Full Name of Contributor Cloppert Latanick Sauter & Washburn					Registration Number, if PAC		
Street Address 225 E Broad St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 11	D 03	Y 14	Amount 100.00	
Full Name of Contributor Rasheeda Zamani Khan					Registration Number, if PAC		
Street Address 4378 Dublin Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 11	D 03	Y 14	Amount 50.00	
Full Name of Contributor Roger P Sugarman					Registration Number, if PAC		
Street Address 6025 Cranberry Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43213	M 11	D 03	Y 14	Amount 100.00	
Full Name of Contributor Melinda Miller					Registration Number, if PAC		
Street Address 4722 Shire Ridge Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 11	D 03	Y 14	Amount 100.00	
Full Name of Contributor Robert G Cohen					Registration Number, if PAC		
Street Address 1657 Wingate Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Delaware	State O H	Zip Code 43015	M 11	D 03	Y 14	Amount 100.00	
Full Name of Contributor Gregg R Lewis					Registration Number, if PAC		
Street Address 625 City Park Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 11	D 03	Y 14	Amount 100.00	
Full Name of Contributor Leo Zupan					Registration Number, if PAC		
Street Address 121 Sanctuary Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43235	M 11	D 03	Y 14	Amount 100.00	
Full Name of Contributor Kitrick Lewis & Harris Co LPA					Registration Number, if PAC		
Street Address 445 Hutchinson Ave, Ste 100		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43235	M 11	D 03	Y 14	Amount 150.00	

* 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))