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## **Statement of Contributions Received**

Prescribed by Secretary of State 3/05

| Name of Committee in Full                            |   |           |                             |                                 |                          |  |
|--|---|-----------|-----------------------------|---------------------------------|--------------------------|--|
| David Young for Judge Committee                      |   |           |                             |                                 |                          |  |
| ull Name of Contributor                              |   |           | Registration Number, if PAC |                                 |                          |  |
| Contributions from Form 31-E                         |   |           |                             |                                 |                          |  |
| Street Address                                       | Employer/Occupation/Labor Organization* |           |                             |                                 | Form (Cash, Check, etc.) |  |
| City   | State                                   | Zip Code  | м D<br>0 4 1 2              | Ý                               | Amount 400.00            |  |
| Full Name of Contributor Registration Numb           |   |           |                             |                                 |                          |  |
| Contributions from Form 31-E                         |   |           |                             |                                 | •                        |  |
| Street Address                                       | Employer/Occup                          |           |                             | Form (Cash, Check, etc.)        |                          |  |
| City   | State                                   | Zip Code  | M D 0 4 2 1                 | 1 1 1                           | Amount<br>810.00         |  |
| Full Name of Contributor                             | '                                       | 1         | Registration Nur            |                                 |                          |  |
| IBEW - COPE  |   |           |                             |                                 |                          |  |
| Street Address                                       | Employer/Occup                          | <u> </u>  | Form (Cash, Check, etc.)    |                                 |                          |  |
| 900 Seventh Street NW                                |   |           |                             | Check                           |                          |  |
| City   | State                                   | Zip Code  | M D                         | Y                               | Amount                   |  |
| Washington   | DIC                                     | 20001     | 0 5 0 2                     | 111                             | 100.00                   |  |
| Full Name of Contributor                             |   |           | Registration Nur            | nber, if PA                     | vc _                     |  |
| Contributions from Form 31-E                         |   |           |                             |                                 |                          |  |
| Street Address                                       | Employer/Occup                          |           | Form (Cash, Check, etc.)    |                                 |                          |  |
| City   | State                                   | Zip Code  | M D 0 4 2 8                 | 1 Y                             | Amount 1,670.00          |  |
| Full Name of Contributor Registration Number, if PAC |   |           |                             |                                 |                          |  |
| David J. Young                                       |   |           |                             |                                 |                          |  |
| Street Address                                       | Employer/Occup                          | _         |                             | Form (Cash, Check, etc.)        |                          |  |
| 305 Spring Branch Rd SW                              |   |           |                             |                                 | Check                    |  |
| City   | State                                   | Zip Code  | M D                         | Y                               | Amount                   |  |
| Supply   | NC                                      | 28462     | 0 5 1 3                     | 111                             | 500.00                   |  |
| Name of Contributor Registration Number, if PAC      |   |           |                             |                                 |                          |  |
| Barbara K. Sokol                                     |   |           |                             |                                 |                          |  |
| Street Address<br>2346 Fishinger Rd                  | Employer/Occup                          |           |                             | Form (Cash, Check, etc.)  Check |                          |  |
| City   | State                                   | Zip Code  | M D                         | Y                               | .Amount                  |  |
| Columbus   | 0   H                                   | 43221     | 0 5 1 3                     |                                 |                          |  |
| Full Name of Contributor                             |   |           | Registration Nur            | nber, if PA                     | VC.                      |  |
| Leo T. Zupan   |   |           |                             |                                 |                          |  |
| Street Address 6797 N High St, Ste 213               | Employer/Occup                          |           |                             | Form (Cash, Check, etc.) Check  |                          |  |
| City   | State                                   | Zip Code  | M D                         | Y                               | Amount                   |  |
| Worthington  | OH                                      | 43085     | 0 5 1 3                     |                                 | 25.00                    |  |
| Full Name of Contributor Registration Number, if PAC |   |           |                             |                                 |                          |  |
| Contributions from Form 31-E                         |   |           |                             |                                 |                          |  |
| Street Address                                       | Employer/Occup                          | F         |                             | Form (Cash, Check, etc.)        |                          |  |
| City   | State                                   | Zip Code  | M D                         | Y                               | Amount                   |  |
| en,  | Jane                                    | The court | 0 5 1 9                     |                                 | 815.00                   |  |
|  | 1                                       |           | TOISTIE                     |                                 | 013.00 g                 |  |

Page Total \$ 4,420.00

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)]