

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Jeffrey M. Brown for Judge							
Full Name of Contributor Todd Barstow					Registration Number, if PAC		
Street Address 538 S. Yearling Rd., Apt. 202		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43213	M 1 0	D 1 1	Y 1 6	Amount 250.00	
Full Name of Contributor John Albert					Registration Number, if PAC		
Street Address 10776 Campden Lakes Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43016	M 1 0	D 1 2	Y 1 6	Amount 250.00	
Full Name of Contributor Sarah Savage					Registration Number, if PAC		
Street Address 5703 Duddingston Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 1 0	D 1 4	Y 1 6	Amount 550.00	
Full Name of Contributor Carl Smallwood					Registration Number, if PAC		
Street Address 4121 Edgehill Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 1 0	D 1 7	Y 1 6	Amount 100.00	
Full Name of Contributor Ron Oshner					Registration Number, if PAC		
Street Address 2796 Wellesley Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43221	M 1 0	D 1 7	Y 1 6	Amount 600.00	
Full Name of Contributor Molly Oshner					Registration Number, if PAC		
Street Address 2796 Wellesley Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43221	M 1 0	D 1 7	Y 1 6	Amount 600.00	
Full Name of Contributor John Brody					Registration Number, if PAC		
Street Address 1894 King Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43212	M 1 0	D 1 7	Y 1 6	Amount 100.00	
Full Name of Contributor Brian Brown					Registration Number, if PAC		
Street Address 310 Richards Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43214	M 0 9	D 2 7	Y 1 6	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)]

Page Total \$ 2,550.00