

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee To Re-Elect Judge Maynard						
Full Name of Contributor Philippa G Houston				Registration Number, if PAC		
Street Address 968 Hines Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Gahanna	State OH	Zip Code 43230	M 0	D 7	Y 1	Amount \$50.00
Full Name of Contributor Gregg R Lewis				Registration Number, if PAC		
Street Address 625 City Park Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	M 0	D 8	Y 0	Amount \$200.00
Full Name of Contributor Lawrence A Riehl				Registration Number, if PAC		
Street Address 500 S Front Street Suite 200		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 8	Y 0	Amount \$100.00
Full Name of Contributor W Mark Jump LLC				Registration Number, if PAC		
Street Address 2130 Arlington Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 8	Y 1	Amount \$2,000.00
Full Name of Contributor Jay Perez				Registration Number, if PAC		
Street Address 6797 N High Street #105		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Worthington	State OH	Zip Code 43085	M 0	D 8	Y 1	Amount \$100.00
Full Name of Contributor Oduwole O Bakare				Registration Number, if PAC		
Street Address 6244 Kingbird Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43230	M 0	D 8	Y 1	Amount \$100.00
Full Name of Contributor Kegler, Brown, Hill & Ritter				Registration Number, if PAC CP648		
Street Address 65 E State Street Suite 1800		Employer/Occupation/Labor Organization* Local PAC			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 8	Y 2	Amount \$600.00
Full Name of Contributor Christopher T Cicero				Registration Number, if PAC		
Street Address 1308 W Mount Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43223	M 0	D 8	Y 3	Amount \$250.00

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

Page Total **\$3,400.00**