

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 Jonathan Pyzik					Registration Number, if PAC		
Street Address 36 Breevort Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43214	M 0 7	D 0 7	Y 1 6	Amount 25.00	
Full Name of Contributor Mary Diane Geswein					Registration Number, if PAC		
Street Address 5357 Coral Berry		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43215	M 0 7	D 1 2	Y 1 6	Amount 100.00	
Full Name of Contributor Jeffrey Berndt					Registration Number, if PAC		
Street Address 575 S. High St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 7	D 1 2	Y 1 6	Amount 50.00	
Full Name of Contributor Scott Elliot Smith, LPA					Registration Number, if PAC		
Street Address 500 Horizons Dr., Suite 200		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 7	D 1 4	Y 1 6	Amount 500.00	
Full Name of Contributor Maguire and Schneider, LLP					Registration Number, if PAC		
Street Address 1650 Lake Shore Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43204	M 0 7	D 1 8	Y 1 6	Amount 250.00	
Full Name of Contributor Lawrence Riehl					Registration Number, if PAC		
Street Address 500 S. Front St., Suite 200		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 7	D 2 1	Y 1 6	Amount 250.00	
Full Name of Contributor Robert Marotta					Registration Number, if PAC		
Street Address 2294 Club Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 7	D 2 9	Y 1 6	Amount 100.00	
Full Name of Contributor Zeiger, Tigges & Little, LLP					Registration Number, if PAC		
Street Address 41 S. High St., Suite 3500		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 8	D 0 2	Y 1 6	Amount 500.00	

* 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 \$ 1,775.00