

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 Franklin County Democratic Lawyers Club					Registration Number, if PAC		
Street Address 1141 S. High St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 1 0	D 2 6	Y 1 6	Amount 500.00	
Full Name of Contributor Michael Probst					Registration Number, if PAC		
Street Address 85 E. Gay St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43215	M 1 0	D 2 7	Y 1 6	Amount 75.00	
Full Name of Contributor Mark Kerns					Registration Number, if PAC		
Street Address 118 Scioto St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Urbana	State O H	Zip Code 43078	M 1 0	D 2 7	Y 1 6	Amount 600.00	
Full Name of Contributor Eric Brown					Registration Number, if PAC		
Street Address 34 W. Poplar Ave., Apt. 205		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43215	M 1 0	D 2 7	Y 1 6	Amount 100.00	
Full Name of Contributor Becky 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 1 0	D 2 7	Y 1 6	Amount 600.00	
Full Name of Contributor Ravi Stepter					Registration Number, if PAC		
Street Address 200 E. Campus View Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43235	M 1 0	D 3 1	Y 1 6	Amount 75.00	
Full Name of Contributor Fred Ricart					Registration Number, if PAC		
Street Address 248 W. Poplar Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43215	M 1 0	D 3 1	Y 1 6	Amount 250.00	
Full Name of Contributor James Gilbert					Registration Number, if PAC		
Street Address 4025 Riverview Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 1 1	D 0 1	Y 1 6	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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 2,450.00