

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full REELECT JUDGE BROWNE! (RJB)							
Full Name of Contributor LEGAL ALTERNATIVES LLC					Registration Number, if PAC		
Street Address 629 N. HIGH ST. 4TH FLOOR		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43215	M 0	D 7	Y 11	Amount 250.00	
Full Name of Contributor KIMBERLY TANEFF					Registration Number, if PAC		
Street Address 7825 BRANDON RD		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City NEW ALBANY	State O H	Zip Code 43054	M 0	D 7	Y 11	Amount 250.00	
Full Name of Contributor PATRICIA REYNOLDS					Registration Number, if PAC		
Street Address 130 GLEN CIRCLE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City WORTHINGTON	State O H	Zip Code 43085	M 0	D 7	Y 11	Amount 200.00	
Full Name of Contributor LAURA PETERMAN*					Registration Number, if PAC		
Street Address 239 BAKER LAKE DRIVE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City WESTERVILLE	State O H	Zip Code 43081	M 0	D 7	Y 11	Amount 250.00	
Full Name of Contributor SUZANNE K. SABOL					Registration Number, if PAC		
Street Address 15 E. KOSSUTH ST.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43206	M 0	D 7	Y 11	Amount 100.00	
Full Name of Contributor THE BEHAL LAW GROUP, LLC					Registration Number, if PAC		
Street Address 501 S. HIGH ST.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43215	M 0	D 7	Y 11	Amount 600.00	
Full Name of Contributor GLORIA SCHANELY					Registration Number, if PAC		
Street Address 3520 LINDENDALE DR.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43204	M 0	D 7	Y 11	Amount 50.00	
Full Name of Contributor VINCENT A DUGAN JR					Registration Number, if PAC		
Street Address 923 E. BROAD ST		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43205	M 0	D 7	Y 11	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 \$ **2,200.00**