

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee To Elect Judge Maynard													
Full Name of Contributor W. Joseph Edwards						Registration Number, if PAC							
Street Address 495 S. High Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43215		M 1 0		D 2 0		Y 0 5		Amount 350.00	
Full Name of Contributor Lea L. Malik / Baker & Hostetler LLP						Registration Number, if PAC OH 125							
Street Address 3200 National City Center			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Cleveland		State O H		Zip Code 44114-3845		M 1 0		D 2 0		Y 0 5		Amount 250.00	
Full Name of Contributor John D. Moore, Jr.						Registration Number, if PAC							
Street Address 7918 Slate Ridge Blvd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Reynoldsburg		State O H		Zip Code 43068		M 1 0		D 2 0		Y 0 5		Amount 300.00	
Full Name of Contributor Samuel B. Weiner Co, LPA						Registration Number, if PAC							
Street Address 743 S. Front Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43206		M 1 0		D 2 4		Y 0 5		Amount 500.00	
Full Name of Contributor Columbus Franklin County AFL CIO PCE						Registration Number, if PAC							
Street Address 1545 Alum Creek Drive - 2nd Fl			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43209		M 1 0		D 2 5		Y 0 5		Amount 200.00	
Full Name of Contributor Jeffrey A. Berndt						Registration Number, if PAC							
Street Address 575 S. High Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43215		M 1 0		D 2 5		Y 0 5		Amount 200.00	
Full Name of Contributor Franklin County Republican Club PAC						Registration Number, if PAC							
Street Address 607 Durrin Rd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43213-3477		M 1 0		D 2 5		Y 0 5		Amount 700.00	
Full Name of Contributor Allen J. Reis						Registration Number, if PAC							
Street Address 3250 Knoll Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Gahanna		State O H		Zip Code 43230		M 1 0		D 2 5		Y 0 5		Amount 200.00	

* 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 \$ 2,700.00