

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 Taft Stettinitus & Hollister Better Government PAC						Registration Number, if PAC 1146							
Street Address 425 Walnut St., Suite 1800			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Cincinnati		State O H		Zip Code 45202		M 0		D 9		Y 3 0		Amount 300.00	
Full Name of Contributor Thomas Mason						Registration Number, if PAC							
Street Address 1570 London Dr.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43221		M 1		D 0		Y 4 1		Amount 200.00	
Full Name of Contributor Richard Holz						Registration Number, if PAC							
Street Address 1660 Gables Ct.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43235		M 1		D 0		Y 5 1		Amount 500.00	
Full Name of Contributor Kris Dawley						Registration Number, if PAC							
Street Address 2581 Brentwood Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43209		M 1		D 0		Y 5 1		Amount 250.00	
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 1		D 0		Y 6 1		Amount 1,000.00	
Full Name of Contributor Malek & Malek, LLC						Registration Number, if PAC							
Street Address 1227 S. High St.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43206		M 1		D 0		Y 6 1		Amount 500.00	
Full Name of Contributor Janet Jackson						Registration Number, if PAC							
Street Address 2865 Castlewood Rd.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Columbus		State O H		Zip Code 43209		M 1		D 0		Y 7 1		Amount 250.00	
Full Name of Contributor West-O-PAC						Registration Number, if PAC 455							
Street Address 1301 E. 9th St., Suite 1900			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check						
City Cleveland		State O H		Zip Code 44114		M 1		D 0		Y 7 1		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 \$ 3,250.00