

## Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full Committee to Retain Judge Reece							
Full Name of Contributor Vorys Sater Seymour and Pease LLP					Registration Number, if PAC OH108		
Street Address 52 E. Gay St.		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State O   H	Zip Code 43215	M 1   0	D 2   4	Y 1   2	Amount 2,000.00	
Full Name of Contributor Kegler, Brown, Hill & Ritter, PAC					Registration Number, if PAC CP648		
Street Address 65 E. State St., Ste. 1800		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check		
City Columbus	State O   H	Zip Code 43215	M 1   0	D 2   4	Y 1   2	Amount 500.00	
Full Name of Contributor Richard Holz					Registration Number, if PAC		
Street Address 1660 Gables Ct.		Employer/Occupation/Labor Organization Ice Miller, LLP			Form (Cash, Check, etc.) Check		
City Columbus	State O   H	Zip Code 43235	M 1   1	D 0   3	Y 1   2	Amount 250.00	
Full Name of Contributor Paul Bittner					Registration Number, if PAC		
Street Address 751 Line Way		Employer/Occupation/Labor Organization Ice Miller, LLP			Form (Cash, Check, etc.) Check		
City Gahanna	State O   H	Zip Code 43230	M 1   1	D 0   3	Y 1   2	Amount 100.00	
Full Name of Contributor Jay Dingledey					Registration Number, if PAC		
Street Address 3478 River Seine St.		Employer/Occupation/Labor Organization Ice Miller, LLP			Form (Cash, Check, etc.) Check		
City Columbus	State O   H	Zip Code 43221	M 1   1	D 0   3	Y 1   2	Amount 250.00	
Full Name of Contributor Richard Barnhart					Registration Number, if PAC		
Street Address 5267 Stratford Ave.		Employer/Occupation/Labor Organization Ice Miller, LLP			Form (Cash, Check, etc.) Check		
City Powell	State O   H	Zip Code 43065	M 1   1	D 0   3	Y 1   2	Amount 150.00	
Full Name of Contributor Jeremy Grayem					Registration Number, if PAC		
Street Address 1853 Glenn Ave.		Employer/Occupation/Labor Organization Ice Miller, LLP			Form (Cash, Check, etc.) Check		
City Columbus	State O   H	Zip Code 43212	M 1   1	D 0   3	Y 1   2	Amount 250.00	
Full Name of Contributor George M. Sarap					Registration Number, if PAC		
Street Address 51 N. High St., Ste. 781		Employer/Occupation/Labor Organization Attorney at Law			Form (Cash, Check, etc.) Check		
City Columbus	State O   H	Zip Code 43215	M 1   1	D 0   3	Y 1   2	Amount 150.00	

\* Required for contributions over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 \$ 3,650.00