

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 Todd G. Wilson						Registration Number, if PAC			
Street Address 900 Fairway Blvd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Whitehall	State O H	Zip Code 43213	M 0	D 9	Y 2	2	0	5	Amount 100.00
Full Name of Contributor Fon R. Holloway						Registration Number, if PAC			
Street Address 1087 Caroway Blvd			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230-6215	M 0	D 9	Y 24	3	0	5	Amount 50.00
Full Name of Contributor Christopher L. Washington						Registration Number, if PAC			
Street Address 7975 Windrift Place			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Reynoldsburg	State O H	Zip Code 43068	M 0	D 9	Y 2	4	0	5	Amount 25.00
Full Name of Contributor Anthony M. Roseboro						Registration Number, if PAC			
Street Address 1143 Summer Hill Circle			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 0	D 9	Y 2	4	0	5	Amount 25.00
Full Name of Contributor Michael M. Johnson						Registration Number, if PAC			
Street Address 4027 Lyon Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43230	M 1	D 0	Y 0	6	0	5	Amount 250.00
Full Name of Contributor Samuel A. Peppers, III						Registration Number, if PAC			
Street Address 3667 Pegg Avenue			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43214	M 1	D 0	Y 0	5	0	5	Amount 25.00
Full Name of Contributor Nick Soulas						Registration Number, if PAC			
Street Address 3923 E. Broad Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43213	M 1	D 0	Y 0	5	0	5	Amount 100.00
Full Name of Contributor M. H. Gertner						Registration Number, if PAC			
Street Address 175 S. Third Street #555			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1	D 0	Y 0	6	0	5	Amount 150.00

* 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 \$ 725.00