

Statement of Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full						
Committee to Retain Judge Reece						Registration Number, if PAC
Full Name of Contributor						Registration Number, if PAC
Blaise Baker *						Registration Number, if PAC
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
600 S. High Street, Suite 201		Attorney			Check	
City	State	Zip Code	M	D	Y	Amount
Columbus	O H	43215	1 0	2 3	0 6	100.00
Full Name of Contributor						Registration Number, if PAC
Eugene Jones						Registration Number, if PAC
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
239 Springbrook Drive					Check	
City	State	Zip Code	M	D	Y	Amount
Gahanna	O H	43230	1 0	2 5	0 6	150.00
Full Name of Contributor						Registration Number, if PAC
Robin S. Stith						Registration Number, if PAC
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
13 E. Kossuth Street					Check	
City	State	Zip Code	M	D	Y	Amount
Columbus	O H	43206	1 0	2 6	0 6	150.00
Full Name of Contributor						Registration Number, if PAC
Earl F. Greer						Registration Number, if PAC
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
1289 E. Livingston Avenue					Check	
City	State	Zip Code	M	D	Y	Amount
Columbus	O H	43205	1 0	3 1	0 6	50.00
Full Name of Contributor						Registration Number, if PAC
Stacey L. Beck *						Registration Number, if PAC
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
4019 Co. Ro. 98		Attorney			Check	
City	State	Zip Code	M	D	Y	Amount
Mt. Gilead	O H	43338	1 1	0 3	0 6	50.00
Full Name of Contributor						Registration Number, if PAC
David W. Alexander						Registration Number, if PAC
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
305 Partridge Bend					Check	
City	State	Zip Code	M	D	Y	Amount
Powell	O H	43065	1 1	0 8	0 6	250.00
Full Name of Contributor						Registration Number, if PAC
John D. Moore						Registration Number, if PAC
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
7918 Slate Ridge Boulevard					Check	
City	State	Zip Code	M	D	Y	Amount
Reynoldsburg	O H	43068	1 1	0 8	0 6	250.00
Full Name of Contributor						Registration Number, if PAC
Marchelle E. Moore						Registration Number, if PAC
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
7918 Slate Ridge Boulevard					Check	
City	State	Zip Code	M	D	Y	Amount
Reynoldsburg	O H	43058	1 1	0 8	0 6	100.00

* 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)

* Franklin County Court Appointee