

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full REELECT JUDGE BROWNE! (RJB)							
Full Name of Contributor SALLIE D. GIBSON					Registration Number, if PAC		
Street Address 1067 FRANKLIN AVE.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43205	M 0	D 4	Y 1	Amount 200.00	
Full Name of Contributor THE NIGH LAW GROUP LLC*					Registration Number, if PAC		
Street Address 115 W MAIN ST. STE 300A		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43215	M 0	D 7	Y 1	Amount 300.00	
Full Name of Contributor CITIZENS FOR MINGO					Registration Number, if PAC		
Street Address 12364 THOROUGHbred DR.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City PICKERINGTON	State O H	Zip Code 43147	M 0	D 7	Y 1	Amount 350.00	
Full Name of Contributor MCKINLAY LAW OFFICES LLC					Registration Number, if PAC		
Street Address 580 S. HIGH ST. STE 200		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43125	M 0	D 6	Y 1	Amount 450.00	
Full Name of Contributor BUCK FISH & WHITE*					Registration Number, if PAC		
Street Address 3380 TREMONT ROAD		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43221	M 0	D 7	Y 1	Amount 150.00	
Full Name of Contributor ROBERT A KOBLENTZ					Registration Number, if PAC		
Street Address 35 E. LIVINGSTON AVE		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43206	M 0	D 7	Y 1	Amount 100.00	
Full Name of Contributor WOLINETZ LAW OFFICES LLC					Registration Number, if PAC		
Street Address 250 CIVIC CENTER DR. STE 220		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43215	M 0	D 7	Y 1	Amount 600.00	
Full Name of Contributor LAW OFFICE OF ALYSON B MILLER* LLC					Registration Number, if PAC		
Street Address 629 N. HIGH ST. 4TH FLOOR		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) CHECK		
City COLUMBUS	State O H	Zip Code 43215	M 0	D 7	Y 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 \$ 2,400.00