

# In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>REELECT JUDGE BROWNE! (RJB)</b>				
Full Name of Contributor <b>JON SAIA</b>		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address <b>713 S. FRONT ST.</b>		Description of Item or Service <b>SUPPLIED FOOD/DRINKS</b>		M   D   Y   Fair Market Value <b>0   3   0   4   1   0   518.80</b>
City <b>COLUMBUS</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43206</b>	
				Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor <b>FRIEDMAN &amp; MIRMAN, CO., LPA</b>		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address <b>1320 DUBLIN ROAD, STE. 101</b>		Description of Item or Service <b>UPPLIED ENTERTAINMEN</b>		M   D   Y   Fair Market Value <b>0   4   0   8   1   0   592.88</b>
City <b>COLUMBUS</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43215</b>	
				Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor <b>GROSSMAN LAW OFFICES, LPA</b>		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address <b>32 W. HOSTER AVE., STE. 100</b>		Description of Item or Service <b>SUPPLIED FOOD/DRINKS</b>		M   D   Y   Fair Market Value <b>0   4   0   8   1   0   592.88</b>
City <b>COLUMBUS</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43215</b>	
				Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address		Description of Item or Service		M   D   Y   Fair Market Value
City		State	Zip Code	
				Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address		Description of Item or Service		M   D   Y   Fair Market Value
City		State	Zip Code	
				Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address		Description of Item or Service		M   D   Y   Fair Market Value
City		State	Zip Code	
				Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address		Description of Item or Service		M   D   Y   Fair Market Value
City		State	Zip Code	
				Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address		Description of Item or Service		M   D   Y   Fair Market Value
City		State	Zip Code	
				Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO

\* 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)]