

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Kim Brown for Judge							
Full Name of Contributor Victoria Powers						Registration Number, if PAC	
Street Address 291 S. Cassingham Road		Employer/Occupation/Labor Organization* Attorney - Ice Miller				Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43209	M 1	D 0	Y 3 0 1 2	Amount \$250.00	
Full Name of Contributor Felix Wade						Registration Number, if PAC	
Street Address 778 Hawksbury Way		Employer/Occupation/Labor Organization* Attorney - Ice Miller				Form (Cash, Check, etc.) check	
City Powell	State OH	Zip Code 43065	M 1	D 0	Y 3 0 1 2	Amount \$250.00	
Full Name of Contributor Friends of John O'Grady Committee						Registration Number, if PAC	
Street Address 545 E. Town Street		Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 3 0 1 2	Amount \$1,000.00	
Full Name of Contributor Elk & Elk						Registration Number, if PAC	
Street Address 6105 Parkland Blvd		Employer/Occupation/Labor Organization* Law firm				Form (Cash, Check, etc.) check	
City Mayfield Hts	State OH	Zip Code 44124	M 1	D 1	Y 0 5 1 2	Amount \$300.00	
Full Name of Contributor Richard Lovering						Registration Number, if PAC	
Street Address 7754 Arboretum Court		Employer/Occupation/Labor Organization* Attorney - Bricker & Eckler				Form (Cash, Check, etc.) electronic debit	
City New Albany	State OH	Zip Code 43054	M 1	D 1	Y 1 2 1 2	Amount \$50.00	
Full Name of Contributor Michael Jones						Registration Number, if PAC	
Street Address 903 Grandon Avenue		Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) electronic debit	
City Bexley	State OH	Zip Code 43209	M 1	D 1	Y 0 5 1 2	Amount \$100.00	
Full Name of Contributor Stepter Law Office						Registration Number, if PAC	
Street Address 3600 Olentangy River Road, Building 501		Employer/Occupation/Labor Organization* Law firm				Form (Cash, Check, etc.) electronic debit	
City Columbus	State OH	Zip Code 43214	M 1	D 1	Y 0 2 1 2	Amount \$100.00	
Full Name of Contributor Jessica Goldman						Registration Number, if PAC	
Street Address 908 City Park Avenue		Employer/Occupation/Labor Organization* 				Form (Cash, Check, etc.) electronic debit	
City Columbus	State OH	Zip Code 43206	M 1	D 0	Y 3 1 1 2	Amount \$50.00	

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$2,100.00**