

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full REELECT JUDGE BROWNE! (R/B)												
Full Name of Contributor STEVEN BROWNE		Employer, Occupation, Labor Organization *		Registration Number, if PAC								
Street Address 1094 CRESWELL DR.		Description of Item or Service EVENT BEVERAGES		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>D</td><td>Y</td><td>Fair Market Value</td> </tr> <tr> <td>0</td><td>7</td><td>3</td><td>318.22</td> </tr> </table>	M	D	Y	Fair Market Value	0	7	3	318.22
M	D	Y	Fair Market Value									
0	7	3	318.22									
City NEW ALBANY		State O H	Zip Code 43054	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO								
Full Name of Contributor MARCUS ROSS		Employer, Occupation, Labor Organization *		Registration Number, if PAC								
Street Address 4249 EASTON WAY, STE. 220		Description of Item or Service VENUE RENTAL		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>D</td><td>Y</td><td>Fair Market Value</td> </tr> <tr> <td>0</td><td>7</td><td>3</td><td>300.00</td> </tr> </table>	M	D	Y	Fair Market Value	0	7	3	300.00
M	D	Y	Fair Market Value									
0	7	3	300.00									
City COLUMBUS		State O H	Zip Code 43219	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO								
Full Name of Contributor BLYTHE M. BETHEL		Employer, Occupation, Labor Organization *		Registration Number, if PAC								
Street Address 2180 LANE WOODS DRIVE		Description of Item or Service CATERING SERVICE		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>D</td><td>Y</td><td>Fair Market Value</td> </tr> <tr> <td>0</td><td>6</td><td>1</td><td>175.00</td> </tr> </table>	M	D	Y	Fair Market Value	0	6	1	175.00
M	D	Y	Fair Market Value									
0	6	1	175.00									
City COLUMBUS		State O H	Zip Code 43221	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO								
Full Name of Contributor RICHARD A. FRAMPTON		Employer, Occupation, Labor Organization *		Registration Number, if PAC								
Street Address 2180 LANE WOODS DRIVE		Description of Item or Service CATERING SERVICE		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>D</td><td>Y</td><td>Fair Market Value</td> </tr> <tr> <td>0</td><td>6</td><td>1</td><td>250.00</td> </tr> </table>	M	D	Y	Fair Market Value	0	6	1	250.00
M	D	Y	Fair Market Value									
0	6	1	250.00									
City COLUMBUS		State O H	Zip Code 43221	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO								
Full Name of Contributor CHRISTOPHER T. FRAMPTON		Employer, Occupation, Labor Organization *		Registration Number, if PAC								
Street Address 2180 LANE WOODS DRIVE		Description of Item or Service CATERING/BEVERAGES		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>D</td><td>Y</td><td>Fair Market Value</td> </tr> <tr> <td>0</td><td>6</td><td>1</td><td>156.29</td> </tr> </table>	M	D	Y	Fair Market Value	0	6	1	156.29
M	D	Y	Fair Market Value									
0	6	1	156.29									
City COLUMBUS		State O H	Zip Code 43221	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO								
Full Name of Contributor ABIGAIL H. FRYE		Employer, Occupation, Labor Organization *		Registration Number, if PAC								
Street Address 2180 LANE WOODS DRIVE		Description of Item or Service BEVERAGES/SUPPLIES		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>D</td><td>Y</td><td>Fair Market Value</td> </tr> <tr> <td>0</td><td>6</td><td>1</td><td>156.28</td> </tr> </table>	M	D	Y	Fair Market Value	0	6	1	156.28
M	D	Y	Fair Market Value									
0	6	1	156.28									
City COLUMBUS		State O H	Zip Code 43221	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO								
Full Name of Contributor THOMAS BANKS		Employer, Occupation, Labor Organization *		Registration Number, if PAC								
Street Address 4249 EASTON WAY, STE. 220		Description of Item or Service ENTERTAINMENT		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>D</td><td>Y</td><td>Fair Market Value</td> </tr> <tr> <td>0</td><td>7</td><td>3</td><td>400.00</td> </tr> </table>	M	D	Y	Fair Market Value	0	7	3	400.00
M	D	Y	Fair Market Value									
0	7	3	400.00									
City COLUMBUS		State O H	Zip Code 43219	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO								
Full Name of Contributor BRANDI ROVITO CASONE		Employer, Occupation, Labor Organization *		Registration Number, if PAC								
Street Address 169 E. LIVINGSTON AVE.		Description of Item or Service INVITATIONS/POSTAGE		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>D</td><td>Y</td><td>Fair Market Value</td> </tr> <tr> <td>0</td><td>6</td><td>2</td><td>55.40</td> </tr> </table>	M	D	Y	Fair Market Value	0	6	2	55.40
M	D	Y	Fair Market Value									
0	6	2	55.40									
City COLUMBUS		State O H	Zip Code 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" 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)]