

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Jeffrey M. Brown for Judge							
Full Name of Contributor Tim D'Angelo					Registration Number, if PAC		
Street Address 33 E. Columbus St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43206	M 1 0	D 2 0	Y 1 6	Amount 250.00	
Full Name of Contributor Fred Berkemer					Registration Number, if PAC		
Street Address 1335 Dublin Rd., Suite 215B		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Online		
City Columbus	State O H	Zip Code 43215	M 1 0	D 2 0	Y 1 6	Amount 100.00	
Full Name of Contributor John Alton					Registration Number, if PAC		
Street Address 681 S. Front St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 1 0	D 2 0	Y 1 6	Amount 150.00	
Full Name of Contributor Committee for Ferguson					Registration Number, if PAC		
Street Address 7702 Plattsburg Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City South Vienna	State O H	Zip Code 45369	M 1 0	D 2 1	Y 1 6	Amount 400.00	
Full Name of Contributor Laura M. Comek Law, LLC					Registration Number, if PAC		
Street Address 7983 Luckstone Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 1 0	D 2 1	Y 1 6	Amount 1,000.00	
Full Name of Contributor Eve Stratton					Registration Number, if PAC		
Street Address 28 W. Stafford Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Worthington	State O H	Zip Code 43085	M 1 0	D 2 5	Y 1 6	Amount 100.00	
Full Name of Contributor Zacks Law Group, LLC					Registration Number, if PAC		
Street Address 33 S. James Rd., 3rd Flr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43213	M 1 0	D 2 6	Y 1 6	Amount 250.00	
Full Name of Contributor Lamkin, Van Eman, Trimble & Dougherty					Registration Number, if PAC		
Street Address 500 S. Front St., Suite 200		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 1 0	D 2 6	Y 1 6	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 \$ 2,500.00