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Statement of Contributions Received

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Prescribed by Secretary of State 03/05

V 00 10 10 00 00								
Name of Committee in Full Committee for Kim Brown for Judg	je							
Full Name of Contributor Thomas B. Ridgley	Registration Number, if PAC							
Street Address 52 East Gay Street	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) check				
City Columbus	State OH	Zip Code 43215	0 5 D 2 1 2	Amount \$250.00				
Full Name of Contributor Gary W. Hammond		Registration Number, if P	AC					
Street Address 556 E. Town Street	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) check				
City Columbus	State OH	Zip Code 43215	0 5 1 0 1 2	Amount \$100.00				
Full Name of Contributor Zeiger, Tigges & Little LLP								
Street Address 41 South High StreetLa, Suite 3500	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) check				
City Columbus	State OH	Zip Code 43215	0 5 1 0 1 2	Amount \$500,00				
Full Name of Contributor Jeffrey A. Berndt Attorney At Law LLC Registration Number, if PAC								
Street Address 575 S. High Street	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) check				
City Columbus	State OH	Zip Code 43215	0 5 1 0 1 2	Amount \$175,00				
Full Name of Contributor Brotherhood of Locomotive Enginee	Registration Number, if P FEC ID NO C-							
Street Address 1370 Ontario Street	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) check				
City Cleveland	State OH	Zip Code 44113	0 6 1 4 1 2	Amount \$250.00				
Full Name of Contributor Lane, Alton & Horst, LLC	Registration Number, if PAC							
Street Address Two Miranova Place, Suite 500	Employer/Occu Law Firm	pation/Labor Organization*		Fonn (Cash, Check, etc.)				
City Columbus	State OH	Zip Code 43215	0 7 2 0 1 2	Amount \$500.00				
Full Name of Contributor Teachers For Better Schools	Registration Number, if P 311102994	AC						
Street Address 929 E. Broad Street	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check				
city Columbus	State OH	Zip Code 43205	0 7 2 7 1 2	Amoust \$1,000.00				
Full Name of Contributor Daniel J. Koczur Registration Number, if PAC								
Street Address 110 N. 3rd Street, Apt 302	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) check				
City Columbus	State	Zip Code 43215	M D Y 1 2	Amount \$575.00				

Page Total \$3,350.00

^{*} 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)]