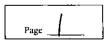
Statement of Contributions Received



Prescribed by Secretary of State 03/05

Name of Committee in Full REELECT JUDGE BROWNE! (RJB)						
Full Name of Contributor Registration Number, if PAC						NC .
JOHN M. JACKSON						
Street Address 51 LIBERTY RIDGE AVE.	Employer/Occupati	on/Labor Organization*				Form (Cash, Check, etc.) CHECK
City POWELL	State OH	Zip Code 43065	0 2	o 9	1 1	Amount 500.00
Full Name of Contributor Registration Number, if PA						AC .
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State OH,	Zip Code	M	D)	Y	Amount
Registration Number, if P.						AC :
Street Address	Employer/Occupati	on/Labor Organization*	<u> </u>			Form (Cash, Check, etc.)
City	State OH	Zip Code	M	D	Y	Amount
Full Name of Contributor Registration Number, if PAC						AC
Street Address	Employer/Occupati	ion/Labor Organization*	<u> </u>			Form (Cash, Check, etc.)
City	State OH	Zip Code	M	D	Y	Amount
Full Name of Contributor Registration Number, if PAC						
Street Address	Employer/Occupat	ion/Labor Organization*			Form (Cash, Check, etc.)	
City	State OH	Zip Čode	M	D	Y	Amount
Full Name of Contributor Registration Number, if P.						AC
Street Address	Employer/Occupat	over/Occupation/Labor Organization*				Form (Cash, Check, etc.)
City	State OH	Zip Code	M	D	Y	Amount
Full Name of Contributor Registration Number, if P					AC	
Street Address	Employer/Occupation/Labor Organization®				Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y	Amount
Full Name of Contributor Registration Number, if P					AC .	
Street Address	Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City	State	Zip Code	M	D	Y	Amount

Page Total 500.00

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)]