

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 Vorvs Sater Sevmour & Pease LLP					Registration Number, if PAC		
Street Address 52 E. Gav St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 4	D 2 2	Y 1 6	Amount 3,600.00	
Full Name of Contributor Christine Wilson					Registration Number, if PAC		
Street Address 3885 Kul Cir. S.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Hilliard	State O H	Zip Code 43026	M 0 4	D 2 9	Y 1 6	Amount 400.00	
Full Name of Contributor Cynthia Hill					Registration Number, if PAC		
Street Address 9144 Tartan Fields Dr.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Dublin	State O H	Zip Code 43017	M 0 4	D 2 9	Y 1 6	Amount 600.00	
Full Name of Contributor Jeffrey Edwards					Registration Number, if PAC		
Street Address 495 S. High St., Suite 150		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 4	D 2 9	Y 1 6	Amount 250.00	
Full Name of Contributor Scott Smith LPA					Registration Number, if PAC		
Street Address 5003 Horizons Dr., Suite 200		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 5	D 1 0	Y 1 6	Amount 500.00	
Full Name of Contributor Harvey Samuels					Registration Number, if PAC		
Street Address 500 S. Front St., 1150		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 5	D 1 7	Y 1 6	Amount 250.00	
Full Name of Contributor Steve Miller					Registration Number, if PAC		
Street Address 500 S. Front St., Suite 1200		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 5	D 1 8	Y 1 6	Amount 500.00	
Full Name of Contributor Robert Marotta					Registration Number, if PAC		
Street Address 2294 Club Rd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 5	D 2 7	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 \$ 6,350.00