

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee To Elect Judge Maynard									
Full Name of Contributor Central Ohio Republican Club						Registration Number, if PAC #OH 11-73			
Street Address 2706 Dayton Avenue			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43202	M 1	D 0	Y 0	Amount 250.00			
Full Name of Contributor Dwayne B. Zimmerman						Registration Number, if PAC			
Street Address 1069 E. 25th Avenue			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43211	M 0	D 9	Y 2	Amount 27.00			
Full Name of Contributor Yvette McGee Brown						Registration Number, if PAC			
Street Address 643 Crossing Creek S.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Gahanna	State O H	Zip Code 43230	M 1	D 0	Y 0	Amount 50.00			
Full Name of Contributor Audrey K. Redmon						Registration Number, if PAC			
Street Address 4987 Sharon Hill Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43235	M 1	D 0	Y 0	Amount 100.00			
Full Name of Contributor Vorys Sater Seymour and Pease LLP						Registration Number, if PAC #OH 108			
Street Address 52 E. Gay Street - PO Box 1008			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215-1008	M 1	D 0	Y 1	Amount 1,200.00			
Full Name of Contributor Michael P. Mahoney						Registration Number, if PAC			
Street Address 10 W. Broad Street Ste 2100			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215-3422	M 1	D 0	Y 1	Amount 300.00			
Full Name of Contributor John E. Green						Registration Number, if PAC			
Street Address 375 S. High Street			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43213	M 1	D 0	Y 1	Amount 300.00			
Full Name of Contributor Joseph T. Ayers						Registration Number, if PAC			
Street Address 9094 Firstgate Drive			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Reynoldsburg	State O H	Zip Code 43068	M 1	D 0	Y 1	Amount 200.00			

* 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 \$ 2,427.00