



Form No. BPC-2021

Board of Professional Conduct of the Supreme Court of Ohio

FINANCIAL DISCLOSURE STATEMENTThis statement is to be filed in 2022
Financial information for calendar year 2021

Please type or print clearly. See instructions for assistance with this page.

SECTION A. PERSONAL CONTACT INFORMATION

Last Name

Miday

First Name

Sherrie

MI

M

Address

City

State

Zip

County

Cuyahoga

E-mail Address

Phone

()

SECTION B. STATUS (Check all that apply)

- ☒ Judge
☐ Retired Judge
☐ Magistrate
☐ Appointed to an unexpired term in elective office
☒ Judicial Candidate
☐ Other (specify) _____

CANDIDATES: Please list the date of the first election (primary, special, or general) when your name will appear on the ballot.

Month	Day	Year
0	5	0 3 2 0 2 2

FILED

Online

3/24/2022

1:56 PM

Confirm #: 1303220456245

SECTION C. PUBLIC POSITION, OFFICE, OR JOB

Position/Title (Example: judge, retired judge, or magistrate)

Common Pleas Court Judge, Cuyahoga County General Division

- ☐ Seeking
☐ Hold
☒ Held

Public Entity you serve in 2022, served in 2021, or will serve if elected

Cuyahoga County Court of Common Pleas, General Division

Public Salary:

- ☐ Less than \$16,000
☐ \$16,000 or more

Start Date:

Month	Day	Year
0	1	0 5 2 0 1 7

End Date:

Month	Day	Year
0	1	0 4 2 0 2 2

SECTION D. ADDITIONAL PUBLIC POSITION, OFFICE, OR JOB

Position/Title

- ☐ Seeking
☐ Hold
☐ Held

Public Entity in which you were/are an official, employee, candidate, or appointee

Public Salary:

- ☐ Less than \$16,000
☐ \$16,000 or more

Start Date:

Month	Day	Year

End Date:

Month	Day	Year

FOR OFFICIAL USE ONLY

- ☐ Walk-in
☐ Fax
☐ Mail
Rev'd by: _____

- ☒ Filer has answered every required question.
☐ Filer has not answered these questions: _____

Date incomplete form returned to filer: _____
Date completed form returned: _____

1. SOURCES OF INCOME - ALL FILERS MUST ANSWER THIS QUESTION:

For help, see instructions

☐ I have no sources of income that I am required to list.

Source of Income	Service Provided	Amount*
A State Farm Life Insurance Company	Interest income	
B KeyBank	Interest on Savings Account	
C State of Ohio	Judicial Income	
D Cuyahoga County	Judicial Income	
E Thompson Reuters	Co-Editor of Ohio Domestic Violence Law Book	

*If required. See instructions to see if you are required to disclose amounts of income.

2. SOURCES OF GIFTS - ALL FILERS MUST ANSWER THIS QUESTION:

For help, see instructions

☒ I have no sources of gifts that I am required to list.

Source of Gift	Source of Gift
A	D
B	E
C	F

3. NAMES OF SPOUSE RESIDING IN HOUSEHOLD AND ANY DEPENDENT CHILDREN - ALL FILERS MUST ANSWER THIS QUESTION:☐ There are no immediate family members whose names I am required to list.

For help, see instructions

Spouse Residing in Household	Dependent Children
Ryan Miday	Helena Miday
Dependent Children	
Athanasius Miday	
Mikhaila Miday	

4. NAMES OF BUSINESSES - ALL FILERS MUST ANSWER THIS QUESTION:

For help, see instructions

If you or anyone you listed in Question 3 owns or operates a business, list the name of the business.

☐ There are no business names that I am required to list.

Business Name	Business Name
A Einstein's Consulting, LLC	C
B	D

5. LAND (REAL ESTATE) IN OHIO - ALL FILERS MUST ANSWER THIS QUESTION:

For help, see instructions

☒ I have no real estate that I am required to list.

Land (Real Estate) in Ohio (List address or, if address is unavailable, plat number and county)
A
B
C
You are not required to disclose your personal residence or real property held primarily for personal recreation.

6. CREDITORS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:

For help, see instructions

☐ I have no creditors that I am required to list.

Creditor	Creditor
A See Attachment	D
B	E
C	F

7. DEBTORS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:

For help, see instructions

☒ I have no debtors that I am required to list.

Debtor	Debtor
A	C
B	D

8. INVESTMENTS OVER \$1,000 - ALL FILERS MUST ANSWER THIS QUESTION:

For help, see instructions

☐ I have no investments that I am required to list.

Corporation, Trust, Business Trust, Partnership, or Association	Nature of Investment
A See Attachment	
B	
C	
D	
E	
F	

IF YOU NEED ADDITIONAL SPACE, PLEASE ATTACH A SEPARATE SHEET

9. OFFICES/FIDUCIARY RELATIONSHIPS - ALL FILERS MUST ANSWER THIS QUESTION:

For help, see instructions

☒ I have no offices or fiduciary relationships that I am required to list.

Corporation, Trust, Business Trust, Partnership, or Association	Office or Nature of Relationship
A	
B	

10. MEALS, FOOD, OR BEVERAGES - ALL FILERS MUST ANSWER THIS QUESTION:

For help, see instructions

☒ I have no sources of meals, food, or beverages that I am required to list.

Source of Food or Beverages	Source of Food or Beverages
A	C
B	D

11. TRAVEL EXPENSES - ALL FILERS MUST ANSWER THIS QUESTION:

For help, see instructions

☐ I have no sources of travel expenses that I am required to list.

Source of Travel Expenses	Amount
A See Attachments	
B	
C	
D	
E	
F	

12. NON-DISPUTED INFORMATION - ALL state employees, state officials and state board and commission members (except college and university trustees) are REQUIRED to answer Question 12. All other filers should skip this question and go to question 13.☒ I have no information that I am required to list.

For help, see instructions

Non-Disputed Information
A
B

13. SIGNATURE - ALL FILERS MUST SIGN THE STATEMENT:

For help, see instructions

By signing this statement:

- I swear or affirm that this statement and any additional attachments have been prepared or carefully reviewed by me, and constitute my complete, truthful, and correct disclosure of all required information, and that the address listed on page 1 is a correct mailing address.
- I acknowledge and understand that, among other potential violations and penalties, knowingly filing a false statement is a criminal misdemeanor of the first degree, punishable by a fine of not more than \$1,000, imprisonment of not more than six months, or both, and that I may be subject to disciplinary action.
- I acknowledge and understand that filing a false statement may be grounds for removal from public office or dismissal from public employment pursuant to Sections 3.04 and 124.34 of the Revised Code.
- I acknowledge that, in 2021, I served in, or in 2022, I am serving in or a candidate for, the position indicated on page 1 of this statement.

If you have any questions before signing this form, please contact the Board of Professional Conduct at (614) 387-9370.

Before signing this statement, please review to make sure that you have answered each question you are required to answer. If you have nothing to list in response to any question, check the box indicating that you have nothing to list. If the response to any required question is omitted, the Board will return the statement to you as incomplete. **Any person who fails to file a complete statement by the appropriate filing deadline may be subject to criminal penalties and disciplinary action.**

Return your completed statement to: Board of Professional Conduct, Moyer Judicial Center, 65 South Front Street, 5th Floor, Columbus, Ohio 43215

YOUR SIGNATURE IS REQUIRED HERE:

Sherrie M. Miday

Date: 3/24/2022 1:56 PM

Confirmation Number: 1303220456245

[illegible]

ATTACHMENT - INVESTMENTS OVER \$1,000

Sherrie M. Miday - 2021

[illegible]

ATTACHMENT - TRAVEL EXPENSES

Sherrie M. Miday - 2021

[illegible]



1375 EAST 9TH STREET • FLOOR 2 • CLEVELAND, OHIO 44114-1785
 PHONE: (216) 696-3525 • FAX: (216) 696-2413
 WWW.CLEMETROBAR.ORG

INVOICE NO. CCPVersion3

Date: 9/24/21

Attention:

Cuyahoga County Court of Common Pleas
 1200 Ontario Street, 11th Floor
 Cleveland, OH 44113
 (216) 443-7320

Quantity	Description	Per Individual	Extended Price
92	Discounted CMBA annual membership dues bundle for judges and attorneys (\$150) a \$10 discount per member – a \$920 savings	\$150	\$13,800.00
	Included Section Membership (\$35 value per member) – a \$3,290 savings		
2	CMBA reduced annual membership dues for attorneys not practicing law and non-lawyer personnel	\$99	\$198.00
		\$30	\$2,820.00
94	1 Hour of CLE per Member (\$30/hr for CCP members; \$10 off an hour) – a \$940 savings		\$1,565.00
	Rollover from 20-21 Year to be applied as a discount this year:		
		Total	\$15,253.00
Additional courtesy discount: \$543			Total Due: \$14,710

See roster for Common Pleas attorneys and judges included on the following pages. Any changes to member roster should be communicated to CMBA Manager of Member Engagement Madeline Poll at mpoll@clemetrobar.org

*\$150.00
per Judge*

CP100105 53200

*OK TO PAY
CMB
10-18-21*

OHIO COMMON PLEAS JUDGES' ASSOCIATION

Judge Scott T. Gusweiler, President

Judge Mark K. Wiest, Treasurer

Hon. Sherrie M. Miday
Cuyahoga Co. Common Pleas Court
1200 Ontario Street
Cleveland, OH 44113-1678

December 2020

Invoice

Ohio Common Pleas Judges' Association Dues for 2021 - \$200

Please make check payable to: Ohio Common Pleas Judges'
Association Tax ID Number [REDACTED]

*****PLEASE REMIT TO ADDRESS BELOW*****

Mail to: Hon. Mark K. Wiest
Wayne Co. Common Pleas Court
107 West Liberty Street
Wooster, OH 44691

Phone: 330-287-5545

Note: Please return this statement (or a photocopy of same) with
your remittance. Thank you.

Payment provides privileges of membership to both the judge named
and to any successor in office for the balance of the dues paying
period.



Expense Voucher

**** One Invoice per Form ****

Check #

COPY

Department Approval: Gregory M. Popovich

Department Name: Common Pleas Court

Date Completed: 11/17/2021

Prepared By: P.A. Minsee

Phone #: 8557

Support Doc Attach: Yes

Hold CK Pickup (Y/N): No

Check Received By:

Invoice #	ET 2100161
Invoice Date	11/15/2021
Handling Code	EXP - Expense Invoice
Invoice Amount	\$636.99

For Internal CP use Only
REIMBURSEMENT FOR TRAVEL EXPENSES TO
ATTEND THE OJACC CONFERENCE IN
COLUMBUS, OH - 09/29/21 - 10/01/21

Payee

Vendor #	2669	Remit To:	
Vendor Name	Sherrie M Miday		
Address 1			
Address 2			
State			

Payment Options:

Separate Payment(Y/N)	No
Enclosure to be Mailed with Payment (Y/N)	No
Unclaimed Funds (Y/N)	No
Invoice Description	OJACC CONFERENCE EXPENSES

Company	Accounting Unit	Account	SubAccount	Activity	Account Category *	Distribution
10	CP100105	53000	0000			\$636.99
						\$0.00
						\$0.00
Total						\$636.99

*The Account Category should be same as the Account. A formula is in place to automatically populate the Account Category.

Cuyahoga County Common Pleas Court

GENERAL DIVISION

THE STATE OF OHIO)
CUYAHOGA COUNTY) ss:

TO THE COUNTY FISCAL OFFICER:

I hereby certify that the within bill is correct and
you are directed to issue your County warrant for
the same.



Administrative Judge

Internal Use Only

Court Administrator

Audited By:	Received Date:	Support Uploaded:	Yes	NO
(Circle)				

Please Print



Expense Voucher

**** One Invoice per Form ****

Check # **COPY**

Invoice #	ET 2100101
Invoice Date	9/3/2021
Handling Code	EXP - Expense Invoice
Invoice Amount	\$660.88

For Internal CP use Only
Ohio Judicial Conference expense reimbursement

Department Approval: Gregory M. Popovich
Department Name: Common Pleas Court
Date Completed: 9/8/2021
Prepared By: _____
Phone #: 8557
Support Doc Attach: Yes
Hold Ck Pickup (Y/N): No
Check Received By: _____

Payee

Vendor #	2669	Remit To:	
Vendor Name	Sherrie M Miday		
Address 1			
Address 2			
State			

Payment Options:

Separate Payment (Y/N)	No
Enclosure to be Mailed with Payment (Y/N)	No
Unclaimed Funds (Y/N)	No
Invoice Description	OJC 9/1/21 - 9/3/21

Company	Accounting Unit	Account	SubAccount	Activity	Account Category *	Distribution
10	CP100105	53000	0000			\$660.88
						\$0.00
						\$0.00
Total						\$660.88

*The Account Category should be same as the Account. A formula is in place to automatically populate the Account Category.

Fees:

Hotel	\$441.80
Mileage	\$150.08
Per Diem	\$69.00
	\$0.00
	\$0.00
	\$0.00
Total:	\$660.88



Cuyahoga County Common Pleas Court
GENERAL DIVISION

THE STATE OF OHIO
CUYAHOGA COUNTY) ss:

TO THE COUNTY FISCAL OFFICER:
I hereby certify that the within bill is correct and you are directed to issue your County warrant for the same.

Internal Use Only

[Signature]
Administrative Judge
Court Administrator

Audited By:

Please Print

Received Date:

Support Uploaded:

Yes

NO

(Circle)



Ohio Judicial Conference

65 South Front Street, 4th Floor / Columbus, OH 43215 / www.ohiojudges.org

Cuyahoga Co. Common Pleas Court
Attn: Patricia Mingee

ISTV NUMBER | 22AM10
INVOICE DATE | 8/25/2021

INVOICE

QUANTITY	UNITS	DESCRIPTION	UNIT PRICE	AMOUNT
1	ea.	2021 Ohio Judicial Conference Annual Meeting registrations for:		
1	ea.	Judge David Matia - printed	\$350.00	\$350.00
1	ea.	Judge Sherrie Miday - printed materials	\$350.00	\$350.00
1	ea.	Judge Michael Russo - electronic materials	\$325.00	\$325.00
4	ea.	Judge Andrew Santoli - printed materials - cancelled	\$350.00	\$350.00
1	ea.	Judge Michael Shaughnessy - printed materials	\$350.00	\$350.00
1	ea.	Judge Brendan Sheehan - printed materials	\$350.00	\$350.00
1	ea.	Judge Kathleen Sutula - printed materials	\$350.00	350.00
Memo:		Judge John J. Russo - no charge		
			SUBTOTAL	\$2,075.00
				\$2,075.00
				PAY THIS AMOUNT

DIRECT ALL INQUIRIES TO:

Aleta Burns, Fiscal/HR Officer
614-387-9757
Aleta.Burns@sc.ohio.gov

REMIT PAYMENT TO:

Ohio Judicial Conference
65 South Front Street, 4th Floor
Columbus, OH 43215

OK to pg
P. A. Myers

Payment due upon receipt

CP100105 53200



**OHIO STATE BAR
ASSOCIATION**
Connect. Advance. Succeed.

2022 Dues Statement

January 1 - December 31, 2022



Renew Today | Continue to
Connect, Advance and Succeed
with the OSBA in 2022!

Company Code: 49924
Invoice Number: 1795020

Judge Sherrie M Miday
State Of Ohio
Courtroom 20-A
2100 Ontario St
Cleveland, OH 44115

Member Number
Preferred email address

If you were a member in 2021, your previous choices are preselected below for your convenience. **Note:** Membership Plan (MP) members can upgrade to Membership Value+ Plan (MVP) at any time. MVP Plan members may only move back to the MP Plan during membership renewal period (90 days before the end of the year).

2022 Membership

- ☒ **MEMBERSHIP PLAN (MP)** continues the services you value, including:
- 1 complimentary section membership to connect with colleagues
 - Savings of 30% off non-member CLE prices (some exclusions apply)

Your Annual Payment: \$ 315.00

- ☐ **MEMBERSHIP VALUE+ PLAN (MVP)** includes all MP features with additional value:
- 2 complimentary section memberships to connect with colleagues
 - 3 complimentary OnDemand CLE courses
 - Savings of 40% off non-member CLE prices (some exclusions apply)

Your Annual Payment: \$ 395.00

Save an additional \$20 by enrolling in annual automatic renewal

SECTIONS

Membership Plan includes 1 COMPLIMENTARY section and Membership Value+ Plan includes 2 COMPLIMENTARY sections. Additional section memberships are at cost.

To make your selection(s), check the box(es) below.

- | | | |
|--|--|--|
| <input type="checkbox"/> Antitrust Law \$10 | <input type="checkbox"/> Intellectual Property Law \$4 | <input type="checkbox"/> Solo, Small Firms and General Practice \$10 |
| <input type="checkbox"/> Corporate Counsel \$3 | <input type="checkbox"/> Labor and Employment Law \$10 | <input type="checkbox"/> Women in the Profession \$10 |
| <input type="checkbox"/> Elder and Special Needs Law \$10 | <input type="checkbox"/> Litigation \$10 | <input type="checkbox"/> Workers' Compensation Law \$10 |
| <input type="checkbox"/> Environmental Law \$10 | <input type="checkbox"/> Real Property Law \$6 | <input type="checkbox"/> Young Lawyers \$10 |
| <input type="checkbox"/> Estate Planning, Trust and Probate Law \$10 | <input type="checkbox"/> Senior Lawyers \$10 | |

Total section membership(s) (excludes complimentary sections): \$

ONDEMAND CLE PASS



MP
☐ 3 courses for \$90

MVP
☐ 6 courses for \$150

OPTIONAL OnDemand CLE Pass \$

MEMBERSHIP INVOICE (return this form in its entirety - do not separate this section)

Print Name: _____

- ☐ Check enclosed made payable to the OSBA
- ☐ Pay by credit card: ☐ MasterCard ☐ VISA ☐ Am. Express ☐ Discover

Account number: _____

Exp. Date: _____ Signature: _____

☐ **Annual automatic renewal** I am authorizing the OSBA to initiate a payment in the total amount listed here and to automatically renew my membership, including any selections I have made for section memberships, CLE passes and contributions to LAWPAAC and/or the OSBF, on or around Dec. 15 in subsequent membership years unless it is canceled by me, the card issuer or the OSBA. If I am taking advantage of a promotional rate or offer, I understand that in subsequent years, my membership will reflect regular benefits and pricing, including for any aforementioned selections I have made. I can make changes to my plan or cancel at any time by contacting the OSBA Member Service Center; however, I understand that there are no refunds or credits for partial months or years and that the OSBA may take up to three business days to process my request.

Totals for selections above:

2022 Membership \$

2022 Section Membership(s) \$

Optional selections:

OnDemand CLE Pass \$

Ohio LAWPAAC donation \$ 25.00

Friend of the Ohio State Bar Foundation \$

To become a Friend of the OSBF, please remit an additional \$100.

NOTE:

Subtract \$20 for enrolling in annual automatic renewal (Authorize enrollment by checking the box to the left. Credit card payment required.)

Total due

\$



Pay by Mail:

Enter credit card information above, or make check payable to Ohio State Bar Association and return form using the enclosed envelope.



Pay Online:

Visit OhioBar.org/Renew2022.



Pay by Phone:

Our friendly Member Services Team is here to answer your questions at (800) 232-7124.

See reverse for disclaimers