31-A
R.C. 3517.12

Statement of Contributions Received

Prescribed by Secretary of State 3/07

Name of Committee in Full						
Committee to Elect James W Brown						
Full Name of Contributor Elizabeth Werner						Registration Number, if PAC
Street Address 469 Cherry Ravine Crt.	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) credit card
City Westerville	State OH	Zip Code 43081	M 10	D 23	Y 14	Amount 100.00
Full Name of Contributor Catherine White						Registration Number, if PAC
Street Address 145 E. Livingston Ave.	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) credit card
City Columbus	State OH	Zip Code 43215	M 10	D 17	Y 14	Amount 75.00
Full Name of Contributor Robin Stith						Registration Number, if PAC
Street Address 13 E. Kossuth St.	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) credit card
City Columbus	State OH	Zip Code 43206	M 11	D 03	Y 14	Amount 100.00
Full Name of Contributor Suzanne Stasiewicz						Registration Number, if PAC
Street Address 533 S. Third St.	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) credit card
City Columbus	State OH	Zip Code 43215	M 10	D 31	Y 14	Amount 250.00
Full Name of Contributor Sue Loughrin						Registration Number, if PAC
Street Address 6824 McVey Blvd.	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) credit card
City Columbus	State OH	Zip Code 43068	M 10	D 21	Y 14	Amount 100.00
Full Name of Contributor Vicki Johnston						Registration Number, if PAC
Street Address 145 E Livingston Ave.	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) credit card
City Columbus	State OH	Zip Code 43215	M 10	D 17	Y 14	Amount 200.00
Full Name of Contributor Samuel Haynes						Registration Number, if PAC
Street Address 6135 Blavery Dr.	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) credit card
City New Albany	State OH	Zip Code 43054	M 10	D 23	Y 14	Amount 100.00
Full Name of Contributor K. Sue Foley						Registration Number, if PAC
Street Address 4898 Sharon Ave.	Employer/Occupation/Labor Organization*					Form (Cash, Check, etc.) credit card
City Columbus	State OH	Zip Code 43214	M 10	D 27	Y 14	Amount 50.00

* 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 $ 975.00