Event Date	030410				
Page	14				

Statement of Contributions Received at a Social or Fundraising Event

	Prescribed b	y Secr	etary of State 3/05	ennement of the second				
Name of Committee in Full								
REELECT JUDGE BROWNE! (RJB)					on the second section of the			
Full Name of Contributor				Registration Number, if PAC				
TROY DOUCET								
Street Address	Employer/Occupation/Labor Organization*			M	D		Amount	
4525 CANDLEWICK CIRCLE					0 4			35.00
City	State		Zip Code	1	sh,Check			
COLUMBUS	$\mid \circ \mid$	Н	43230		HEC	K		
Full Name of Contributor		and the same of th		Registra	tion Numb	er, if PAC	C	
WILLIAM FRIEDMAN								
Street Address	Employer/C	Оссира	tion/Labor Organization*	M	D		Amount	
76 ASHBOURNE ROAD				0 3	$0 \mid 4$	$1 \mid 0$		100.00
City	State		Zip Code	١ `	sh,Check	' '		
COLUMBUS	0	H	43209		CHEC			
Full Name of Contributor		200000000000000000000000000000000000000		Registra	tion Numl	oer, if PAG	C	
SCOTT FRIEDMAN								
Street Address	Employer/Occupation/Labor Organization*			М	D		Amount	
7706 SUTTON PL.				0 3	0 4	1 0		35.00
City	State	;	Zip Code	,	ish,Check			
NEW ALBANY	0	Н	43054		CHEC			
Full Name of Contributor				Registra	tion Num	ber, if PA	С	
KENNETH GOLDBERG								
Street Address	Employer/0	Эссира	tion/Labor Organization*	M	D	Y	Amount	
575 S. 3RD ST.					$0 \mid 4$			100.00
City	State		Zip Code	,	ash,Check			
COLUMBUS		H	43215		CHEC			
Full Name of Contributor Registration Number, if PAC								
KELLY GWIN								
Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount	<u> </u>	
1309 W. 7TH AVE.				0 3	0 4	1 0		35.00
City	State		Zip Code		ash,Checl	-		
COLUMBUS		H	43212	THE RESERVE OF THE PERSON NAMED IN	CHEC	THE RESERVE OF THE PERSON NAMED IN		
Full Name of Contributor				Registra	ition Num	ber, if PA	Ċ	
MARK A. HERDER								
Street Address	Employer/	Оссира	ation/Labor Organization*	М	D	Y	Amount	
901 S. HIGH ST.					$0 \mid 4$			35.00
City	State	e	Zip Code	1	ash,Checl			
COLUMBUS		Н	43206		CASI			
Full Name of Contributor	no francisco de la constante de			Registra	ition Num	ber, if PA	.C	
ERIC HOFFMAN* (COURT APPOINT	ED AT	TOI	RNEY)					
Street Address	Employer/Occupation/Labor Organization*			М	D	Y	Amount	
338 S. HIGH ST.	SELF			$0 \mid 4$			35.00	
City	State Zip Code		Form(Cash,Check,etc)					
COLUMBUS		H	43215	•	CASI	$-\mathbf{I}$		
	-down boles	MANAGEMENT OF THE PARTY OF THE		and the second second	***************************************		A STATE OF THE PARTY OF THE PAR	

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column.

Total contributions this event	Total expenditures this event	
		Page Total \$375.00_
	0.00	

^{*} 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)]