

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Event Date

Page

7/24/14
12

Name of Committee in Full		Full Name of Contributor		Registration Number, if PAC
Committee for Chris Brown for Judge		Paul Scott		
Street Address	Employer/Occupation/Labor Organization*	M	D	Y
536 S. High Street		0	7	24
City	State	Zip Code	Amount	
Columbus	OH	43215	350.00	
Form (Cash, Check, etc.)				
Full Name of Contributor		Registration Number, if PAC		
RICHANNE ZYMKOSKI				
Street Address	Employer/Occupation/Labor Organization*	M	D	Y
2128 Poplar Street		0	7	24
City	State	Zip Code	Amount	
Columbus	OH	43207	50.00	
Form (Cash, Check, etc.)				
Full Name of Contributor		Registration Number, if PAC		
Amy Pridday				
Street Address	Employer/Occupation/Labor Organization*	M	D	Y
3412 Smileys Con.		0	7	24
City	State	Zip Code	Amount	
Hilliard	OH	43026	50.00	
Form (Cash, Check, etc.)				
Full Name of Contributor		Registration Number, if PAC		
Richard Pfeiffer				
Street Address	Employer/Occupation/Labor Organization*	M	D	Y
238 E. Royal Forest Blvd.		0	7	24
City	State	Zip Code	Amount	
Columbus	OH	43214	100.00	
Form (Cash, Check, etc.)				
Full Name of Contributor		Registration Number, if PAC		
LUTTMAN HECK & ASSOCIATES LLP				
Street Address	Employer/Occupation/Labor Organization*	M	D	Y
580 E. Rich Street		0	7	24
City	State	Zip Code	Amount	
Columbus	OH	43215	100.00	
Form (Cash, Check, etc.)				
Full Name of Contributor		Registration Number, if PAC		
Street Address	Employer/Occupation/Labor Organization*	M	D	Y
City	State	Zip Code	Amount	
Form (Cash, Check, etc.)				
Full Name of Contributor		Registration Number, if PAC		
Street Address	Employer/Occupation/Labor Organization*	M	D	Y
City	State	Zip Code	Amount	
Form (Cash, Check, etc.)				

* 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 also appear. [R.C. 3517.10(B)(4)]

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

2,350.00

Total expenditures this event

250.00

Page Total \$ 650.00