Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full: Committee to Elect James W Brown

Full Name of Contributor	Registration Number, if PAC	Street Address	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.)	City	State	Zip Code	M	D	Y	Amount
Paley for Columbus		545 E. Town St.		check	Columbus	OH	43215	12	10	14	100.00
M. Brooks Rorapaugh		3593 Medina Rd.		check	Medina	OH	44256	12	08	14	300.00

* 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 $ 400.00