

31-E

R.C. 3517.10(B)

Event Date 5/16/12

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

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Kim Brown for Judge					
Full Name of Contributor Ted Barrows				Registration Number, if PAC	
Street Address 4834 Sarasota Drive	Employer/Occupation/Labor Organization* Judge		M 0	D 5	Y 1012
City Hilliard	State OH	Zip Code 43026	Form (Cash, Check, etc.) check		Amount \$100.00
Full Name of Contributor Michael Silberstein				Registration Number, if PAC	
Street Address 1093 Fountain Lane, Apt. D	Employer/Occupation/Labor Organization*		M 0	D 5	Y 1012
City Columbus	State OH	Zip Code 43123	Form (Cash, Check, etc.) check		Amount \$100.00
Full Name of Contributor Daniel O'Connor				Registration Number, if PAC	
Street Address 1637 Berkshire Road	Employer/Occupation/Labor Organization*		M 0	D 5	Y 3112
City Upper Arlington	State OH	Zip Code 43221	Form (Cash, Check, etc.) check		Amount \$200.00
Full Name of Contributor Shyam Rajadhyaksha				Registration Number, if PAC	
Street Address 6121 Huntley Road	Employer/Occupation/Labor Organization*		M 0	D 5	Y 3112
City Columbus	State OH	Zip Code 43229	Form (Cash, Check, etc.) check		Amount \$100.00
Full Name of Contributor Thomas Waldeck				Registration Number, if PAC	
Street Address 1027 Peggys Cove	Employer/Occupation/Labor Organization*		M 0	D 5	Y 3112
City Reynoldsburg	State OH	Zip Code 43068	Form (Cash, Check, etc.) check		Amount \$100.00
Full Name of Contributor Carole Depaola				Registration Number, if PAC	
Street Address 4944 Buck Thorn Lane	Employer/Occupation/Labor Organization*		M 0	D 5	Y 3112
City Columbus	State OH	Zip Code 43220	Form (Cash, Check, etc.) check		Amount \$100.00
Full Name of Contributor Frederick A. Vierow				Registration Number, if PAC	
Street Address 6670 Haymore Avenue West	Employer/Occupation/Labor Organization*		M 0	D 5	Y 3112
City Worthington	State OH	Zip Code 43085	Form (Cash, Check, etc.) check		Amount \$100.00

* 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 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

\$2,670.00

Total expenditures this event.

\$37.23

Page Total \$ 800.00