

31-E
R.C. 3517.10(B)

Event Date 7/25/2018
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Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full Committee for Kim Brown for Judge				
Full Name of Contributor Shawn Parker			Registration Number, if PAC	
Street Address 250 Daniel Burnham Sq, #401	Employer/Occupation/Labor Organization* AEP		M D Y 0 7 2 5 1 8	Amount 250.00
City Columbus	State O H	Zip Code 43215	Form(Cash,Check,etc) Check	
Full Name of Contributor Michael Huggett			Registration Number, if PAC	
Street Address 106 N. High Street, Apt 201	Employer/Occupation/Labor Organization* AEP		M D Y 0 7 2 5 1 8	Amount 100.00
City Columbus	State O H	Zip Code 43215	Form(Cash,Check,etc) Check	
Full Name of Contributor Donald Tootle			Registration Number, if PAC	
Street Address 7364 Riverside Drive	Employer/Occupation/Labor Organization* Retired		M D Y 0 7 2 5 1 8	Amount 50.00
City Dublin	State O H	Zip Code 43016	Form(Cash,Check,etc) Check	
Full Name of Contributor Law Offices of Thomas Tootle, Co., LPA			Registration Number, if PAC	
Street Address 85 East Gay Street, suite 900	Employer/Occupation/Labor Organization* Law Firm		M D Y 0 7 2 5 1 8	Amount 50.00
City Columbus	State O H	Zip Code 43215	Form(Cash,Check,etc) Check	
Full Name of Contributor Nickolas Papadorotheou			Registration Number, if PAC	
Street Address 29893 Sequoia Trail	Employer/Occupation/Labor Organization* Information Technologis		M D Y 0 7 2 5 1 8	Amount 100.00
City Westlake	State O H	Zip Code 44145	Form(Cash,Check,etc) Check	
Full Name of Contributor Brunner Quinn			Registration Number, if PAC	
Street Address 35 North Fourth Street, Suite 200	Employer/Occupation/Labor Organization* Law Firm		M D Y 0 7 2 5 1 8	Amount 50.00
City Columbus	State O H	Zip Code 43215	Form(Cash,Check,etc) Check	
Full Name of Contributor George Pallas			Registration Number, if PAC	
Street Address 106 North High Street, Apt 601	Employer/Occupation/Labor Organization* IBM		M D Y 0 7 2 5 1 8	Amount 100.00
City Columbus	State O H	Zip Code 43215	Form(Cash,Check,etc) Check	

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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)]

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 \$ 700.00