

31-E

R.C. 3517.10(B)

Event Date 1/15/13

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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 Brian J. Rigg			Registration Number, if PAC	
Street Address 755 South High Street	Employer/Occupation/Labor Organization* Attorney		M D Y 0 1 1 5 1 3	Amount \$100.00
City Columbus	State OH	Zip Code 43206	Form (Cash, Check, etc.) cash	
Full Name of Contributor Thomas A. Gjostein			Registration Number, if PAC	
Street Address 6720 Hayhurst St	Employer/Occupation/Labor Organization*		M D Y 0 1 1 5 1 3	Amount \$350.00
City Worthington	State OH	Zip Code 43085	Form (Cash, Check, etc.) check	
Full Name of Contributor Carole Depaola			Registration Number, if PAC	
Street Address 4944 Buck Thorn Lane	Employer/Occupation/Labor Organization*		M D Y 0 1 1 5 1 3	Amount \$100.00
City Columbus	State OH	Zip Code 43220	Form (Cash, Check, etc.) check	
Full Name of Contributor Zeiger, Tigges & Little, LLP			Registration Number, if PAC	
Street Address 41 South High Street, Suite 3500	Employer/Occupation/Labor Organization* law firm		M D Y 0 1 1 5 1 3	Amount \$500.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) check	
Full Name of Contributor Vassy Law Office			Registration Number, if PAC	
Street Address 145 E. Rich Street, 2nd Floor	Employer/Occupation/Labor Organization* law firm		M D Y 0 1 1 5 1 3	Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) check	
Full Name of Contributor Gregory H. Melick			Registration Number, if PAC	
Street Address 7222 Marylebury Square	Employer/Occupation/Labor Organization* Attorney - Luper Neidentha		M D Y 0 1 1 5 1 3	Amount \$100.00
City New Albany	State OH	Zip Code 43054	Form (Cash, Check, etc.) check	
Full Name of Contributor John Fitch			Registration Number, if PAC	
Street Address 580 S. High Street, Suite 100	Employer/Occupation/Labor Organization* Attorney		M D Y 0 1 1 5 1 3	Amount \$250.00
City Columbus	State OH	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, 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

\$5,365.00

Total expenditures this event.

\$350.35

Page Total \$ 1,500.00