

# 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 Nathan S. Akamine			Registration Number, if PAC	
Street Address 844 S. Front Street	Employer/Occupation/Labor Organization*		M   D   Y   0   1   1   5   1   3	Amount \$100.00
City Columbus	State OH	Zip Code 43206	Form (Cash, Check, etc.) check	
Full Name of Contributor Committee to Elect Dominic Paretti			Registration Number, if PAC	
Street Address 522 1/2 S. Pearl Street	Employer/Occupation/Labor Organization*		M   D   Y   0   1   1   5   1   3	Amount \$25.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) check	
Full Name of Contributor James S. Savage III			Registration Number, if PAC	
Street Address 8127 Winchcombe Drive	Employer/Occupation/Labor Organization*		M   D   Y   0   1   1   5   1   3	Amount \$100.00
City Dublin	State OH	Zip Code 43016	Form (Cash, Check, etc.) check	
Full Name of Contributor Kristen J. Brown			Registration Number, if PAC	
Street Address 1489 Oakbourne Drive	Employer/Occupation/Labor Organization*		M   D   Y   0   1   1   5   1   3	Amount \$100.00
City Worthington	State OH	Zip Code 43235	Form (Cash, Check, etc.) check	
Full Name of Contributor Lloyd Pierre-Louis			Registration Number, if PAC	
Street Address 6227 Beringer Drive	Employer/Occupation/Labor Organization*		M   D   Y   0   1   1   5   1   3	Amount \$100.00
City Westerville	State OH	Zip Code 43082	Form (Cash, Check, etc.) check	
Full Name of Contributor Todd W. Barstow			Registration Number, if PAC	
Street Address 4185 E. Main Street	Employer/Occupation/Labor Organization* Attorney		M   D   Y   0   1   1   5   1   3	Amount \$100.00
City Columbus	State OH	Zip Code 43213	Form (Cash, Check, etc.) check	
Full Name of Contributor John P. Gilligan			Registration Number, if PAC	
Street Address 1420 Castleton Road N.	Employer/Occupation/Labor Organization*		M   D   Y   0   1   1   5   1   3	Amount \$200.00
City Columbus	State OH	Zip Code 43220	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 \$ 725.00