

FOR PAPER FILING ONLY**Statement of Contributions Received
at a Social or Fund-Raising Event**

Prescribed by Secretary of State 03/05

Event Date 2/12/14

Page **\$ 3**

Name of Committee in Full Committee for Chris Brown for Judge				
Full Name of Contributor Megan Grant		Registration Number, if PAC		
Street Address 6491 Ash Rock Cir.	Employer/Occupation/Labor Organization* Attorney - self	M 0	D 2	Y 14
City Westerville	State OH	Zip Code 43081-7107	Amount 100.00	
Form (Cash, Check, etc.) Check				
Full Name of Contributor Jeffrey Mackey		Registration Number, if PAC		
Street Address 1538 Melrose Ave	Employer/Occupation/Labor Organization* Attorney - self	M 0	D 2	Y 14
City Columbus	State OH	Zip Code 43224	Amount 75.00	
Form (Cash, Check, etc.) Check				
Full Name of Contributor George Breitmayer		Registration Number, if PAC		
Street Address 182 Corbins Mill Dr	Employer/Occupation/Labor Organization* Attorney - Ross + Midian	M 0	D 2	Y 14
City Dublin	State OH	Zip Code 43017-3358	Amount 100.00	
Form (Cash, Check, etc.) Check				
Full Name of Contributor Roger Soroka		Registration Number, if PAC		
Street Address 139 E. Main St. Apt 300	Employer/Occupation/Labor Organization* Attorney - self	M 0	D 2	Y 14
City Columbus	State OH	Zip Code 43215	Amount 200.00	
Form (Cash, Check, etc.) Check				
Full Name of Contributor Leffman, Heck + Assoc. LLP		Registration Number, if PAC		
Street Address 580 E. Rich St	Employer/Occupation/Labor Organization* Attorney	M 0	D 2	Y 14
City Columbus	State OH	Zip Code 43215	Amount 100.00	
Form (Cash, Check, etc.) Check				
Full Name of Contributor Christopher Shook		Registration Number, if PAC		
Street Address 572 Hunnicut Dr	Employer/Occupation/Labor Organization* Attorney - self Morrow, Gordon & Byrd	M 0	D 2	Y 14
City Reynoldsburg	State OH	Zip Code 43068	Amount 100.00	
Form (Cash, Check, etc.) Check				
Full Name of Contributor Joseph Gibson		Registration Number, if PAC		
Street Address 625 S. Lazelle St.	Employer/Occupation/Labor Organization* Attorney - Franklin Co.	M 0	D 2	Y 14
City Columbus	State OH	Zip Code 43206	Amount 50.00	
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

1765 \$0.00
\$1,765.00

Total expenditures this event.

~~\$625.00~~
\$0.00

\$725.00

Page Total \$

\$0.00