

31-E
R.C. 3517.10(B)

Event Date	2/15/2018
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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 **Robert Krapenc			Registration Number, if PAC	
Street Address 1069 Lakegrove Court	Employer/Occupation/Labor Organization* Attorney	M 0	D 2	Y 18 Amount 250.00
City Westerville	State O H	Zip Code 43081	Form(Cash,Check,etc) Check	
Full Name of Contributor Shannon Leis			Registration Number, if PAC	
Street Address 454 E. Main Street, 260	Employer/Occupation/Labor Organization* Attorney	M 0	D 2	Y 18 Amount 125.00
City Columbus	State O H	Zip Code 43215	Form(Cash,Check,etc) Check	
Full Name of Contributor Bricker & Eckler, LLP			Registration Number, if PAC OH821	
Street Address 100 S. Third Street	Employer/Occupation/Labor Organization* Law Firm	M 0	D 2	Y 18 Amount 1,000.00
City Columbus	State O H	Zip Code 43215	Form(Cash,Check,etc) Check	
Full Name of Contributor **Jeffrey W. Moore			Registration Number, if PAC	
Street Address 100 East Main Street	Employer/Occupation/Labor Organization* Attorney	M 0	D 2	Y 18 Amount 100.00
City Columbus	State O H	Zip Code 43215	Form(Cash,Check,etc) Cash	
Full Name of Contributor **Adam Lee Nemann			Registration Number, if PAC	
Street Address 1243 S. High Street	Employer/Occupation/Labor Organization* Attorney	M 0	D 2	Y 18 Amount 500.00
City Columbus	State O H	Zip Code 43206	Form(Cash,Check,etc) Check	
Full Name of Contributor Steven Nolder			Registration Number, if PAC	
Street Address 35 E. Livingston Avenue	Employer/Occupation/Labor Organization* Attorney	M 0	D 2	Y 18 Amount 250.00
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, #601	Employer/Occupation/Labor Organization* IBM	M 0	D 2	Y 18 Amount 250.00
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 \$ 2,475.00

** On appointed counsel list.