

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Contributor in Full Committee to Elect James W Brown						
Full Name of Contributor Artz, Dewhirst & Wheeler, LLP				Registration Number, if PAC		
Street Address 580 E. Town St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43215	M 10	D 29	Y 2014	Amount 100.00
Full Name of Contributor John Beneviat				Registration Number, if PAC		
Street Address 3099 Sullivant Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43230	M 10	D 30	Y 2014	Amount 100.00
Full Name of Contributor Collins & Slagle Co. LPA				Registration Number, if PAC		
Street Address 21 E. State St. Suite 930		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43215	M 11	D 05	Y 2014	Amount 1,000.00
Full Name of Contributor Columbus FireFighters Union L-67PAC Fund				Registration Number, if PAC		
Street Address 370 W. Broad St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43215	M 11	D 03	Y 2014	Amount 500.00
Full Name of Contributor Virgina Cornwell				Registration Number, if PAC		
Street Address 603 E. Town St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43215	M 10	D 30	Y 2014	Amount 100.00
Full Name of Contributor Stephen Daulton				Registration Number, if PAC		
Street Address 336 S. High St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43215	M 10	D 30	Y 2014	Amount 200.00
Full Name of Contributor Barry Epstein				Registration Number, if PAC		
Street Address 580 S. High St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43215	M 10	D 20	Y 2014	Amount 100.00
Full Name of Contributor Friends of Kilroy				Registration Number, if PAC		
Street Address 645 E. Town St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43215	M 10	D 30	Y 2014	Amount 100.00

* 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 appear. [R.C. 3517.10(B)(4)]

Page Total \$ 2,200.00