

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full <b>Committee for Kim Brown for Judge</b>				
Full Name of Contributor <b>**Nichole Churchill</b>			Registration Number, if PAC	
Street Address <b>283 South 3ed Street</b>	Employer/Occupation/Labor Organization* <b>Attorney</b>		M   D   Y <b>0   6   2   0   1   8</b>	Amount <b>50.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Cash</b>	
Full Name of Contributor <b>**Roth Law Group</b>			Registration Number, if PAC	
Street Address <b>24 N. High Street, Suite 301</b>	Employer/Occupation/Labor Organization* <b>Lawfirm</b>		M   D   Y <b>0   6   2   0   1   8</b>	Amount <b>250.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Abraham Law Offices</b>			Registration Number, if PAC	
Street Address <b>24 N. High Street, Suite 301</b>	Employer/Occupation/Labor Organization* <b>Lawfirm</b>		M   D   Y <b>0   6   2   0   1   8</b>	Amount <b>250.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Warren Grody</b>			Registration Number, if PAC	
Street Address <b>6341 Beaver Lake Drive</b>	Employer/Occupation/Labor Organization* <b>Attorney</b>		M   D   Y <b>0   6   2   0   1   8</b>	Amount <b>150.00</b>
City <b>Grove City</b>	State <b>O   H</b>	Zip Code <b>43123</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Kevin Wood</b>			Registration Number, if PAC	
Street Address <b>110 N. 3rd Street, Unit 401</b>	Employer/Occupation/Labor Organization* <b>Civil Engineer</b>		M   D   Y <b>0   6   2   0   1   8</b>	Amount <b>100.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Douglas Blue</b>			Registration Number, if PAC	
Street Address <b>1625 Guilford Road</b>	Employer/Occupation/Labor Organization* <b>Attorney</b>		M   D   Y <b>0   6   2   0   1   8</b>	Amount <b>100.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43221</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Teresa J. Black</b>			Registration Number, if PAC	
Street Address <b>110 N 3rd Street, Unit 202</b>	Employer/Occupation/Labor Organization* <b>CFO</b>		M   D   Y <b>0   6   2   0   1   8</b>	Amount <b>100.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	

\* 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.

\*\* On appointed counsel list.

Total contributions this event

Total expenditures this event

Page Total \$ 1,000.00