



Statement of Other Income

Form 31-A-2

R.C. 3517.10(B)

Full Name of Committee Committee for Chris Brown for Judge			
Full Name of Contributor Chris Brown		Registration Number, if PAC	
Street Address 693 Montrose Avenue	Type* Loan Payments Received	Date (MM/DD/YYYY) 05/02/2019	Form (Cash, Check, etc.) Check
City Bexley	State OH	Zip Code 43209	Amount 1,000.00
Full Name of Contributor Chris Brown		Registration Number, if PAC	
Street Address 693 Montrose Avenue	Type* Loan Payments Received	Date (MM/DD/YYYY) 10/07/2019	Form (Cash, Check, etc.) Cash
City Bexley	State OH	Zip Code 43209	Amount 40.00
Full Name of Contributor		Registration Number, if PAC	
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount
Full Name of Contributor		Registration Number, if PAC	
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount
Full Name of Contributor		Registration Number, if PAC	
Street Address	Type* Refund	Date (MM/DD/YYYY)	Form (Cash, Check, etc.)
City	State OH	Zip Code	Amount

* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.

Page Total \$ 1040.00