

31-E

R.C. 3517.10(B)

Event Date 9/18/12

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Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Kim Brown for Judge				
Full Name of Contributor David L. Berkley			Registration Number, if PAC	
Street Address 110 N Third Street, Unit 708	Employer/Occupation/Labor Organization*		M D Y 0 9 1 8 1 2	Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) check	
Full Name of Contributor Todd W. Barstow			Registration Number, if PAC	
Street Address 4185 E. Main Street	Employer/Occupation/Labor Organization* Attorney		M D Y 0 9 1 8 1 2	Amount \$350.00
City Columbus	State OH	Zip Code 43213	Form (Cash, Check, etc.) check	
Full Name of Contributor Thomas A. Gjostein			Registration Number, if PAC	
Street Address 6720 Hayhurst Street	Employer/Occupation/Labor Organization*		M D Y 0 9 1 8 1 2	Amount \$100.00
City Worthington	State OH	Zip Code 43085	Form (Cash, Check, etc.) check	
Full Name of Contributor Thomas R. Waldeck			Registration Number, if PAC	
Street Address 1027 Peggy's Cove	Employer/Occupation/Labor Organization*		M D Y 0 9 1 8 1 2	Amount \$100.00
City Reynoldsburg	State OH	Zip Code 43068	Form (Cash, Check, etc.) check	
Full Name of Contributor Committee to Re-Elect Judge Gill			Registration Number, if PAC	
Street Address 39 Schiller Aly	Employer/Occupation/Labor Organization* Judicial Committee		M D Y 0 9 1 8 1 2	Amount \$500.00
City Columbus	State OH	Zip Code 43206	Form (Cash, Check, etc.) check	
Full Name of Contributor Carol A. Wright			Registration Number, if PAC	
Street Address 318 Berger Aly	Employer/Occupation/Labor Organization*		M D Y 0 9 1 8 1 2	Amount \$100.00
City Columbus	State OH	Zip Code 43206	Form (Cash, Check, etc.) check	
Full Name of Contributor Christopher M. Brown Law Offices LLC DBA J. Scott Weisman Law Offices			Registration Number, if PAC	
Street Address 601 S. High Street, Fl. 1	Employer/Occupation/Labor Organization* Law firm		M D Y 0 9 1 8 1 2	Amount \$500.00
City Columbus	State OH	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, 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

\$2,400.00

Total expenditures this event.

\$0.00

Page Total \$ 1,750.00