31-E R.C. 3517.10(B)

Event Date_	5/23/12
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Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

<u></u>				
Name of Committee in Full Committee for Kim Brown for Jud	iae			
Full Name of Contributor			Registration Number, if PAC	
Nicholas Pittner				
Street Address 5103 Goodson Road	Employer/Occupation/Labor Organization* Attorney		0 5 2 2 1 2	Amount \$100.00
City West Jefferson	Stal te OH	Zip Code 43162	Form (Cash, Check, etc.) check	
Full Name of Contributor Richard Blake			Registration Number, if	PAC
Street Address 7135 Fox Ledges lane	Attorney			Amount \$100.00
City Chagrin Falls	Stal te OH	Zip Code 44022	Form (Cash, Check, etc.)	
Full Name of Contributor Cavett Kreps		17044	Registration Number, if PAC	
Street Address 2524 Welsford Road	Attorney	Employer/Occupation/Labor Organization* Attorney		Amount \$100.00
City Columbus	Stal te	Zíp Code 43221	Form (Cash, Check, etc.)	
Full Name of Contributor	OH	40221	Registration Number, if	PAC
Betsy Swift			Negistration regions, ii	
Street Address 1601 Pemberton Drive		Employer/Occupation/Labor Organization* Attorney		Amount \$100.00
City Columbus	Stal te OH	Zip Code 43221	Form (Cash, Check, etc.) Check	
Full Name of Contributor Randolph Wiseman			Registration Number, if	
Street Address 8792 Glen View Drive	Attorney	Employer/Occupation/Labor Organization* Attorney		Amount \$50.00
^{City} Plain City	Stal te OH	Zip Code 43064	Form (Cash, Check, etc.) check	
Full Name of Contributor Rebecca Princehorn			Registration Number, if	PAC
Street Address 6179 Maxton Place	Attorney	Employer/Occupation/Labor Organization* Attorney		Amount \$100.00
Сі _в Worthington	Stal te OH	Zip Code 43085	Form (Cash, Check, etc.) Check	
Full Name of Contributor Elbert Kram		— 1978 - 19	Registration Number, if	PAC
Street Address 4216 Fairfax Drive	Attorney		0 5 1 7 1 2	
City Columbus	Stal te OH	Zip Code 43220	Form (Cash, Check, etc.) check	

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

\$7,155.00

Total expenditures this event.

\$0.00

\$650.00

^{*} 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 also appear. [R.C. 3517.10(B)(4)]