

31-E
R.C. 3517.10(B)

Event Date 2/28/12

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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 James D. Abrams			Registration Number, if PAC	
Street Address 7643 Goodrich Square, S.	Employer/Occupation/Labor Organization*		M D Y 0 2 8 1 2	Amount \$100.00
City New Albany	State OH	Zip Code 43054	Form (Cash, Check, etc.) check	
Full Name of Contributor Robert J. Weiler			Registration Number, if PAC	
Street Address 10 North High Street, Suite 401	Employer/Occupation/Labor Organization*		M D Y 0 2 8 1 2	Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) check	
Full Name of Contributor Christopher J. Minnillo			Registration Number, if PAC	
Street Address 1500 W. Third Avenue, Suite 210	Employer/Occupation/Labor Organization* Attorney		M D Y 0 2 8 1 2	Amount \$100.00
City Columbus	State OH	Zip Code 43212	Form (Cash, Check, etc.) check	
Full Name of Contributor Thomas R. Waldeck			Registration Number, if PAC	
Street Address 1027 Peggys Cove	Employer/Occupation/Labor Organization*		M D Y 0 2 8 1 2	Amount \$100.00
City Reynoldsburg	State OH	Zip Code 43068	Form (Cash, Check, etc.) check	
Full Name of Contributor Jon J. Saia			Registration Number, if PAC	
Street Address 713 South Front Street	Employer/Occupation/Labor Organization*		M D Y 0 2 8 1 2	Amount \$100.00
City Columbus	State OH	Zip Code 43206	Form (Cash, Check, etc.) check	
Full Name of Contributor Law Office of Thomas F. Hayes, LLC			Registration Number, if PAC	
Street Address 65 E. Livingston Avenue	Employer/Occupation/Labor Organization*		M D Y 0 2 8 1 2	Amount \$125.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) check	
Full Name of Contributor William J. Moore			Registration Number, if PAC	
Street Address 325 S. High Street, Suite 300	Employer/Occupation/Labor Organization*		M D Y 0 2 8 1 2	Amount \$100.00
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

\$4,625.00

Total expenditures this event.

\$0.00

Page Total \$ 725.00