

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

Form 31-E
R.C. 3517.10(B)

Full Name of Committee Committee to Re-Elect James W. Brown				
Full Name of Contributor Thomas P. Sexton			Registration Number, if PAC	
Street Address Supreme Ct. #0051863	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 04/11/2018	Amount 100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, Etc Check	
Full Name of Contributor Ditty Financial Forensics, LLC			Registration Number, if PAC	
Street Address 6065 Frantz Road, Suite 101	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 04/11/2018	Amount 100.00
City Dublin	State OH	Zip Code 43017	Form (Cash, Check, Etc Check	
Full Name of Contributor Angela Albert Brown			Registration Number, if PAC	
Street Address 536 South High Street	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 04/11/2018	Amount 150.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, Etc Check	
Full Name of Contributor Michael J. Delligatti			Registration Number, if PAC	
Street Address 500 South Front Street, Suite 1150	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 04/11/2018	Amount 150.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, Etc Check	
Full Name of Contributor Winkler Legal Services, LLC			Registration Number, if PAC	
Street Address 35 East Livingston Avenue	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 04/11/2018	Amount 200.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, Etc Check	