



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			Registration Number, if PAC	
Christopher Tamms				
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
5 West Main Street			06/20/2018	\$75.00
City	State	Zip Code	Form (Cash, Check, Etc)	
Westerville	OH	43081	credit card	
Full Name of Contributor			Registration Number, if PAC	
James Hanneman				
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
7049 Violet Veil Court			06/20/2018	\$200.00
City	State	Zip Code	Form (Cash, Check, Etc)	
Dublin	OH	43016	credit card	
Full Name of Contributor			Registration Number, if PAC	
James Botti				
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
4904 Pesaro Way			06/20/2018	\$25.00
City	State	Zip Code	Form (Cash, Check, Etc)	
Dublin	OH	43017	credit card	
Full Name of Contributor			Registration Number, if PAC	
Thomas McCash				
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
55 South High Street, #210			06/20/2018	\$100.00
City	State	Zip Code	Form (Cash, Check, Etc)	
Dublin	OH	43017	credit card	
Full Name of Contributor			Registration Number, if PAC	
Brian Russell				
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
6911 Linbrook Boulevard, Suite 180			06/21/2018	\$250.00
City	State	Zip Code	Form (Cash, Check, Etc)	
Columbus	OH	43235	credit card	