31-E R.C. 3517.10(B)

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

Event Date 5/23/12	
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Prescribed by Secretary of State 03/05

Name of Committee in Full				· · · · · · · · · · · · · · · · · · ·
Committee for Kim Brown for Judge				
Full Name of Contributor CPM LAW PAC	<u>.</u>		Registration Number, if PAC OH1505	
	1		M D Y Amount	
Street Address 366 East Broad Street	Employer/Occupa	ation/Labor Organization*	0 5 2 3 1 2 \$250.00	
City	Stal te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43215	check	
Full Name of Contributor			Registration Number, if F	AC
Laura Anthony				ı.————
Street Address 6800 Alloway St. E	Employer/Occup Bricker &	ation/Labor Organization* . Eckler, LLP	0 5 2 3 1 2 \$100.00	
City	Stal te	Zip Code	Form (Cash, Check, etc.)	
Worthington	OH	43085	check	
Full Name of Contributor	1 011		Registration Number, if I	PAC
Karen L. Clouse				
Street Address	Employer/Occup	ation/Labor Organization*	M D Y	Amount
5248 Parkcrest lane	Attorne		0 5 2 3 1 2	\$100.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43220	check	
Full Name of Contributor			Registration Number, if I	PAC
Thomas R. Sant				r
Street Address		ation/Labor Organization*	M D Y Amount	
4322 Huntwicke Court	Attorne	<u> </u>	0 5 2 3 1 2 \$100.00	
City	Sta te	Zip Code	Fonn (Cash, Check, etc.)	
Hilliard	J OH	43026	Check Registration Number, if	PAC
Full Name of Contributor Mark Evans			Registration (Million, 11	
Street Address	I '	ation/Labor Organization*	0 5 2 3 1 2 Amount \$100.00	
7957 Plantation Drive.	Attorne			
^{City} West Chester	State OH	Zip Code 45069	Form (Cash, Check, etc.) check	
Full Name of Contributor Sylvia Gillis			Registration Number, if	PAC
Street Address		oation/Labor Organization*	0 5 2 3 1 2	Amount \$100.00
1810 N. Devon Road	Attorne	У		
City Columbus	Stal te OH	Zip Code 43212	Form (Cash, Check, etc.)	,
Full Name of Contributor			Registration Number, if PAC	
Don Gregory				
Street Address	Employer/Occup	pation/Labor Organization*	0 5 2 3 1 2	Amount \$100.00
6205 Plain City Georgesville Road		T-: 0 .		
City Dloin City	Sta te	Zip Code 43064	Form (Cash, Check, etc., check	
Plain City	OH		utor is self-employed, the occ	and the news

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

Page Total \$ \$850.00

^{*} 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)]