

|            |            | 0      |
|------------|------------|--------|
| Event Date | 06/20/2018 | Page 9 |

## **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 |                             |   |
| Law Office of Margaret Blackmore LLC                   |   |                             |                             |                             |   |
| Street Address   | Employer/Occupation/Labor Organization* |                             | tion/Labor Organization*    | Date (MM/DD/YYYY)           | Amount  |
| 580 South High Street, Suite 120                       |   |                             |                             | 06/27/2018                  | \$150.00  |
| City   | S                                       | State                       | Zip Code                    | Form (Cash, Check, Etc      |   |
| Columbus   | c                                       | DH                          | 43215                       | check                       |   |
| Full Name of Contributor                               |   |                             | ·                           | Registration Number, if PAC | gode to tengo governos i i girini i i i e e i i |
| Robert Hetterschiedt                                   |   |                             |                             |                             |   |
| Street Address   | Employer/Occupation/Labor Organization* |                             | tion/Labor Organization*    | Date (MM/DD/YYYY)           | Amount  |
| 580 South High Street, Suite 200                       |   |                             | 06/26/2018                  | \$100.00                    |   |
| City   | S                                       | State                       | Zip Code                    | Form (Cash, Check, Etc      |   |
| Columbus   | c                                       | DН                          | 43215                       | credit card                 |   |
| Full Name of Contributor                               |   | Registration Number, if PAC |                             |                             |   |
|  |   |                             |                             |                             |   |
| treet Address Employer/Occupation/Labor Organization   |   | tion/Labor Organization*    | Date (MM/DD/YYYY)           | Amount                      |   |
|  |   |                             |                             |                             |   |
| City   | S                                       | State                       | Zip Code                    | Form (Cash, Check, Etc      |   |
|  |   |                             |                             |                             |   |
| Full Name of Contributor                               |   | Registration Number, if PAC |                             |                             |   |
|  |   |                             |                             |                             |   |
| Street Address Employer/Occupation/Labor Organization* |   | Date (MM/DD/YYYY)           | Amount                      |                             |   |
|  |   |                             |                             |                             |   |
| City   | s                                       | State                       | Zip Code                    | Form (Cash, Check, Etc      |   |
|  |   |                             |                             |                             |   |
| Full Name of Contributor                               |   |                             | <u> </u>                    | Registration Number, if PAC |   |
|  |   |                             |                             |                             |   |
| Street Address   | Employer/Occupation/Labor Organization* |                             | Date (MM/DD/YYYY)           | Amount                      |   |
|  |   |                             |                             |                             |   |
| City   |   | State                       | Zip Code                    | Form (Cash, Check, Etc      |   |
|  |   |                             |                             |                             |   |
|  |   |                             |                             |                             |   |

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

| <b>Total Contributions</b> | This | Event |
|----------------------------|------|-------|
| \$7,700.00                 |      |       |

| <b>Total Expenditures</b> | This | Event |
|---------------------------|------|-------|
| \$506.46                  |      |       |

| Page Total \$250 | 0.00 |  |
|------------------|------|--|

<sup>\*</sup> 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)]