



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 Suzanne Bernstein			Registration Number, if PAC		
Street Address 2380 Lane Woods Drive		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/24/2018	Amount \$25.00
City Columbus		State OH	Zip Code 43221	Form (Cash, Check, Etc check	
Full Name of Contributor Kathryn Mount Sheskey			Registration Number, if PAC		
Street Address 3358 Littler Lane		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/24/2018	Amount \$25.00
City Columbus		State OH	Zip Code 43228	Form (Cash, Check, Etc check	
Full Name of Contributor Philip Cochran			Registration Number, if PAC		
Street Address 1475 Bridgeton Drive		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/24/2018	Amount \$25.00
City Columbus		State OH	Zip Code 43220	Form (Cash, Check, Etc check	
Full Name of Contributor Michael F. Bowers			Registration Number, if PAC		
Street Address 2752 Coventry Road		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/24/2018	Amount \$30.00
City Columbus		State OH	Zip Code 43221	Form (Cash, Check, Etc check	
Full Name of Contributor D. Bart Adams			Registration Number, if PAC		
Street Address 971 Grandon Avenue		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/24/2018	Amount \$50.00
City Bexley		State OH	Zip Code 43209	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	Total Expenditures This Event	Page Total \$ 155.00
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