

31-A
R.C. 3517.10

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Page _____

Name of Committee in Full Committee for Kim Brown for Judge						
Full Name of Contributor Maryellen Spirito					Registration Number, if PAC	
Street Address 1492 Rayne Lane		Employer/Occupation/Labor Organization* Attorney - Arnold Todaro & Welch			Form (Cash, Check, etc.) electronic	
City Columbus	State OH	Zip Code 43220	M 0	D 9	Y 1 9 1 2	Amount \$100.00
Full Name of Contributor Mary P. Sberna					Registration Number, if PAC	
Street Address 5486 Aubrey Loop		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) electronic	
City Dublin	State OH	Zip Code 43016	M 0	D 9	Y 2 0 1 2	Amount \$20.00
Full Name of Contributor Michael L. Silberstein					Registration Number, if PAC	
Street Address 1093 Fountain Lane, Apt. D		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43213	M 0	D 9	Y 1 8 1 2	Amount \$10.00
Full Name of Contributor Stanley Juzwiak					Registration Number, if PAC	
Street Address 30057 Le Masters Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Richwood	State OH	Zip Code 43344	M 0	D 9	Y 2 4 1 2	Amount \$575.00
Full Name of Contributor Mary Pat Juzwiak					Registration Number, if PAC	
Street Address 30057 Le Masters Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Richwood	State OH	Zip Code 43344	M 0	D 9	Y 2 4 1 2	Amount \$575.00
Full Name of Contributor Taft, Stettinius & Hollister					Registration Number, if PAC OH1146	
Street Address 425 Walnut Street, Suite 1800		Employer/Occupation/Labor Organization* Law firm			Form (Cash, Check, etc.) check	
City Cincinnati	State OH	Zip Code 45202	M 0	D 9	Y 2 4 1 2	Amount \$250.00
Full Name of Contributor UFCW Local 1059					Registration Number, if PAC LA437	
Street Address 4150 E. Main Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43213	M 0	D 9	Y 2 7 1 2	Amount \$500.00
Full Name of Contributor Carpenter Lipps & Leland LLP					Registration Number, if PAC	
Street Address 280 North High Street, Suite 1300		Employer/Occupation/Labor Organization* Law firm			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 1 5 1 2	Amount \$500.00

* 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)]

Page Total **\$2,530.00**