31-	A
R.C.	3517.10

Statement of Contributions Received

Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Kim Brown for J	udge			
Full Name of Contributor Kathleen H. Ransier			Registration Number, if	PAC
Street Address 1801 E Long Street	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43203	0 9 1 2 1 2	Amount \$100.00
Full Name of Contributor Susan E. Geary	<u></u>		Registration Number, if	PAC
Street Address 923 City Park Avenue		Employer/Occupation/Labor Organization* Attorney		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43206	0 9 1 1 1 2	Amount \$100.00
Full Name of Contributor Bricker & Eckler, LLP	Registration Number, if OH821	Registration Number, if PAC OH821		
Street Address 100 South Third Street		Employer/Occupation/Labor Organization* Law firm		
^{City} Columbus	State OH	Zip Code 43215	0 9 1 4 1 2	Amount \$1,450.00
Full Name of Contributor Alan Duffy			Registration Number, if	
Street Address 94 Hoffman Avenue	Employer/Occu Attorney			Fonn (Cash, Check, etc.) electronic
City Columbus	State OH	Zip Code 43205	0 8 0 6 1 2	Amount \$50.00
Full Name of Contributor Brendan Kelley			Registration Number, if	_
Street Address 4030 N. High Street, Apt 29	Employer/Occu	ipation/Labor Organization*		Form (Cash, Check, etc.) electronic
City Columbus	State OH	Zip Code 43214	0 8 1 5 1 2	Amount \$50.00
Full Name of Contributor Julia Dorrian			Registration Number, if	
Street Address 106 Montrose Way	Attorney	pation/Labor Organization - Court of Appeals		Form (Cash, Check, etc.) electronic
City Columbus	State OH	Zip Code 43214	0 8 3 0 1 2	
Full Name of Contributor K. Sue Foley			Registration Number, if	
Street Address 4898 Sharon Avenue		ipation/Labor Organization		Form (Cash, Check, etc.) electronic
City Columbus	State OH	Zip Code 43214	0 8 2 9 1 2	
Full Name of Contributor Christine Poth			Registration Number, if	_
Street Address 1771 Cambridge Blvd	Attorney	pation/Labor Organization - Bricker & Eckler		Form (Cash, Check, etc.) electronic
City Columbus	State OH	Zip Code 43212	0 9 1 3 1 2	Amount 2 \$150.00

Page Total \$2,225.00

^{*} 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)]