



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 Parr Peterson			Registration Number, if PAC		
Street Address 2840 Pickwick		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/17/2018	Amount \$200.00
City Columbus		State OH	Zip Code 43221	Form (Cash, Check, Etc credit card	
Full Name of Contributor Margaret Waks			Registration Number, if PAC		
Street Address 1064 Harvest Ridge Court		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/18/2018	Amount \$50.00
City Gahanna		State OH	Zip Code 43230	Form (Cash, Check, Etc credit card	
Full Name of Contributor Steven Walker			Registration Number, if PAC		
Street Address 1926 Collingswood Road		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/20/2018	Amount \$300.00
City Columbus		State OH	Zip Code 43221	Form (Cash, Check, Etc credit card	
Full Name of Contributor Virginia C. Cornwell			Registration Number, if PAC		
Street Address 408 Emery Street		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/20/2018	Amount \$100.00
City Gahanna		State OH	Zip Code 43230	Form (Cash, Check, Etc check	
Full Name of Contributor Michael Kirch			Registration Number, if PAC		
Street Address 3230 Riverview Lane		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 07/24/2018	Amount \$50.00
City Daytona Beach		State FL	Zip Code 32118	Form (Cash, Check, Etc credit card	

\* 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 \$ 700.00