

FOR PAPER FILING ONLY

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Chris Brown for Judge						
Full Name of Contributor Ofra Greenshtein				Registration Number, if PAC		
Street Address 3651 Drayton Hall N.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal	
City New Albany	State OH	Zip Code 43504	M 0	D 8	Y 0814	Amount 600
Full Name of Contributor Udi Greenshtein				Registration Number, if PAC		
Street Address 3651 Drayton Hall N.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal	
City New Albany	State OH	Zip Code 43504	M 0	D 8	Y 0814	Amount 600
Full Name of Contributor K. Sue Foley				Registration Number, if PAC		
Street Address 4948 Sharon Ave.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal	
City Columbus	State OH	Zip Code 43214	M 0	D 7	Y 1514	Amount 125
Full Name of Contributor Transferred from Form 31E				Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)	
City	State OH	Zip Code	M 0	D 8	Y 3014	Amount 650
Full Name of Contributor FOP Political Education Fund				Registration Number, if PAC		
Street Address 6800 Schrock Hill Ct.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43229	M 0	D 8	Y 2514	Amount 500
Full Name of Contributor Barbara Lang				Registration Number, if PAC		
Street Address 336 Fort Washington, Apt 4A		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal	
City New York	State NY	Zip Code 10033	M 0	D 8	Y 1914	Amount 25
Full Name of Contributor Kimberly Cocroft				Registration Number, if PAC		
Street Address 968 Wellington Blvd.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal	
City Columbus	State OH	Zip Code 43219	M 0	D 8	Y 2214	Amount 100
Full Name of Contributor Frederick Sowards				Registration Number, if PAC		
Street Address 1011 Highland St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal	
City Columbus	State OH	Zip Code 43201	M 0	D 8	Y 2714	Amount 250

* 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)]

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