

Event Da	te08/2	22/2018	Page 2

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				Registration Number, if PAC	
Valeriya Kryvokolinksa					
Street Address	Employer/	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
1613 Yeardley Trail				08/22/2018	\$75.00
City	S	State	Zip Code	Form (Cash, Check, Etc	
Columbus	c	DH	43209	check	
Full Name of Contributor	<u> </u>			Registration Number, if PAC	
William Dana Lavelle					
Street Address Em		mployer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
12190 Taylor Road				08/22/2018	\$100.00
City	s	State	Zip Code	Form (Cash, Check, Etc	
Plain City	c	DН	43064	check	
Full Name of Contributor	<u> </u>			Registration Number, if PAC	
Timothy D. Gerrity					
Street Address Emplo		ployer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
001 Meeklynn Drive		08/22/2018	\$75.00		
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus	C	DΗ	43235	check	
Full Name of Contributor				Registration Number, if PAC	
Roger M. Koeck					
Street Address	Employer/	mployer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
6257 Emberwood Road				08/22/2018	\$75.00
City		State	Zip Code	Form (Cash, Check, Etc	
Dublin		OH	43017	check	
Full Name of Contributor	-			Registration Number, if PAC	
Gill Brothers LLC, dba India Oak Grill					
Street Address Empl		ployer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
590 Oakland Park Avenue, Suite A		08/22/2018	\$100.00		
City	- 18	State	Zip Code	Form (Cash, Check, Etc	
Columbus		HC	43214	check	

Fill in the boxes below only on the last page for this event.

Fill in the boxes below only on the last page 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

Transfer the Total contributions for this even	(to form 140. 51-A. Origer 1 di 14ame di Contributor state Contribu	MONS HOLL COLLEGE OF E.
event in the date column		
Total Contributions This Event	Total Expenditures This Event	425.00

Page Total :	\$ ^{425.00}	

^{*} 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)]