31-E
R.C. 3517.10(B)

Event Date 1-29-15
Page 1

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full
Committee to Elect James W Brown

Full Name of Contributor			Registration Number, if PAC			
Abe Bahgat						
Street Address	Employer/Occupation/Labor Organization		M	D	Y	Amount
338 S. High ST			01	31	15	100.00
City	State	Zip Code	Form(Cash,Check,etc)			
Columbus	OH	43215	check			
Full Name of Contributor			Registration Number, if PAC			
Bradley Frick						
Street Address	Employer/Occupation/Labor Organization		M	D	Y	Amount
1265 Neil Ave.			01	31	15	300.00
City	State	Zip Code	Form(Cash,Check,etc)			
Columbus	OH	43201	check			
Full Name of Contributor			Registration Number, if PAC			
Elaine Buck						
Street Address	Employer/Occupation/Labor Organization		M	D	Y	Amount
1570 Fishinger Rd. Suite 200			02	10	15	200.00
City	State	Zip Code	Form(Cash,Check,etc)			
Columbus	OH	43220	check			
Full Name of Contributor			Registration Number, if PAC			
Joel Campell						
Street Address	Employer/Occupation/Labor Organization		M	D	Y	Amount
575 South Third st						150.00
City	State	Zip Code	Form(Cash,Check,etc)			
Columbus	OH	43215	check			
Full Name of Contributor			Registration Number, if PAC			
Jon Cope						
Street Address	Employer/Occupation/Labor Organization		M	D	Y	Amount
36600 Olentangy Rd.			03	09	15	150.00
City	State	Zip Code	Form(Cash,Check,etc)			
Columbus	OH	43214	check			
Full Name of Contributor			Registration Number, if PAC			
Stephen Daulton						
Street Address	Employer/Occupation/Labor Organization		M	D	Y	Amount
336 S. High St						200.00
City	State	Zip Code	Form(Cash,Check,etc)			
Columbus	OH	43215	check			
Full Name of Contributor			Registration Number, if PAC			
Dougherty, Hanneman & Snedaker, LLC						
Street Address	Employer/Occupation/Labor Organization		M	D	Y	Amount
3010 Hayden Rd						100.00
City	State	Zip Code	Form(Cash,Check,etc)			
Columbus	OH	43235	check			

* 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 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
$ 4,650.00

Total expenditures this event
$ 1,023.80

Page Total $ 1,200.00