31-E
R.C. 3517.10(B)

Event Date 10-23-14
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Statement of Contributions Received

at a Social or Fundraising Event

Prescribed by Secretary of State 3/07

Name of Committee in Full					
Committee to Elect James W Brown					
Full Name of Contributor			Registration Number, if PAC		
Marty Anderson					
Street Address	Employer/Occupation/Labor Orgai		M D Y	Amount	
3409 River Seine St.			10 23 2014		100.00
City	State	Zip Code	Form(Cash,Check,		
Columbus	OH	43221	check		
Full Name of Contributor			Registration Number, if PAC		
Babbitt & Dahlberg LLC					
Street Address	Employer/Occupation/Labor Orgai		M D Y	Amount	
503 S. Front St Suite 200			10 23 14		500.00
City	State	Zip Code	Form(Cash,Check,		
Columbus	OH	43215	check		
Full Name of Contributor			Registration Number, if PAC		
Michael Barr					
Street Address	Employer/Occupation/Labor Orgai		M D Y	Amount	
842 S. Roosevelt Ave			10 23 2014		50.00
City	State	Zip Code	Form(Cash,Check,		
Bexley	OH	43209	check		
Full Name of Contributor			Registration Number, if PAC		
Bergman & Yiangou					
Street Address	Employer/Occupation/Labor Orgai		M D Y	Amount	
3099 Sullivant Ave.			10 23 2014		150.00
City	State	Zip Code	Form(Cash,Check,		
Columbus	OH	43204	check		
Full Name of Contributor			Registration Number, if PAC		
Loren Braverman					
Street Address	Employer/Occupation/Labor Orgai		M D Y	Amount	
77 N Ardmore Rd.			10 23 2014		50.00
City	State	Zip Code	Form(Cash,Check,		
Columbus	OH	43209	check		
Full Name of Contributor			Registration Number, if PAC		
Angela Albert Brown					
Street Address	Employer/Occupation/Labor Orgai		M D Y	Amount	
536 S. High St.			10 23 2014		150.00
City	State	Zip Code	Form(Cash,Check,		
Columbus	OH	43215	check		
Full Name of Contributor			Registration Number, if PAC		
Cloppert, Latanick, Sauter & Washburn					
Street Address	Employer/Occupation/Labor Orgai		M D Y	Amount	
225 East road St.			10 23 2014		250.00
City	State	Zip Code	Form(Cash,Check,		
Columbus	OH	43215	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

Total expenditures this event

Page Total $ 1,250.00