

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Kim Brown for Judge					
Full Name of Contributor Nathan S. Akamine				Registration Number, if PAC	
Street Address 844 S. Front Street		Employer/Occupation/Labor Organization*		M 0	D 1
City Columbus		State OH	Zip Code 43206	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor Committee to Elect Dominic Paretti				Registration Number, if PAC	
Street Address 522 1/2 S. Pearl Street		Employer/Occupation/Labor Organization*		M 0	D 1
City Columbus		State OH	Zip Code 43215	Y 1	Amount \$25.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor James S. Savage III				Registration Number, if PAC	
Street Address 8127 Winchcombe Drive		Employer/Occupation/Labor Organization*		M 0	D 1
City Dublin		State OH	Zip Code 43016	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor Kristen J. Brown				Registration Number, if PAC	
Street Address 1489 Oakbourne Drive		Employer/Occupation/Labor Organization*		M 0	D 1
City Worthington		State OH	Zip Code 43235	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor Lloyd Pierre-Louis				Registration Number, if PAC	
Street Address 6227 Beringer Drive		Employer/Occupation/Labor Organization*		M 0	D 1
City Westerville		State OH	Zip Code 43082	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor Todd W. Barstow				Registration Number, if PAC	
Street Address 4185 E. Main Street		Employer/Occupation/Labor Organization* Attorney		M 0	D 1
City Columbus		State OH	Zip Code 43213	Y 1	Amount \$100.00
				Form (Cash, Check, etc.) check	
Full Name of Contributor John P. Gilligan				Registration Number, if PAC	
Street Address 1420 Castleton Road N.		Employer/Occupation/Labor Organization*		M 0	D 1
City Columbus		State OH	Zip Code 43220	Y 1	Amount \$200.00
				Form (Cash, Check, etc.) 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 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

\$5,365.00

Total expenditures this event.

\$350.35

Page Total \$ 725.00