

31-E
R.C. 3517.10(B)

Event Date 8/15/12

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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 Committee David Young for Judge			Registration Number, if PAC	
Street Address 6073 Ashleylynn Court	Employer/Occupation/Labor Organization*		M 0 D 8 Y 15	Amount \$100.00
City Dublin	State OH	Zip Code 43016	Form (Cash, Check, etc.) check	
Full Name of Contributor Serrott for Judge			Registration Number, if PAC	
Street Address 1447 Beaman Drive	Employer/Occupation/Labor Organization*		M 0 D 8 Y 15	Amount \$50.00
City Columbus	State OH	Zip Code 43228	Form (Cash, Check, etc.) check	
Full Name of Contributor Kendra Kinney			Registration Number, if PAC	
Street Address 1054 Ridge Drive	Employer/Occupation/Labor Organization*		M 0 D 8 Y 15	Amount \$50.00
City Circleville	State OH	Zip Code 43113	Form (Cash, Check, etc.) cash	
Full Name of Contributor Matt Pendy			Registration Number, if PAC	
Street Address 123 Bellefield Avenue	Employer/Occupation/Labor Organization*		M 0 D 8 Y 15	Amount \$10.00
City Westerville	State OH	Zip Code 43081	Form (Cash, Check, etc.) cash	
Full Name of Contributor Terri Jamison			Registration Number, if PAC	
Street Address 580 South High Street, Suite 200	Employer/Occupation/Labor Organization*		M 0 D 8 Y 15	Amount \$100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, etc.) cash	
Full Name of Contributor Cynthia Sours- Morehart			Registration Number, if PAC	
Street Address 4063 Riverview Drive	Employer/Occupation/Labor Organization* Attorney/Magistrate		M 0 D 8 Y 15	Amount \$50.00
City Columbus	State OH	Zip Code 43221	Form (Cash, Check, etc.) cash	
Full Name of Contributor			Registration Number, if PAC	
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount
City	State OH	Zip Code	Form (Cash, Check, etc.)	

* 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

\$2,635.00

Total expenditures this event.

\$0.00

Page Total \$ 360.00
