



**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 Moreland Law Office			Registration Number, if PAC	
Street Address 165 East Livingston Avenue		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 02/06/2018
City Columbus		State OH	Zip Code 43215	Amount 150.00
Form (Cash, Check, Etc) check				
Full Name of Contributor Reash Law Offices			Registration Number, if PAC	
Street Address 1170 Old Henderson Road, Suite 118		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 02/06/2018
City Columbus		State OH	Zip Code 43220	Amount 100.00
Form (Cash, Check, Etc) check				
Full Name of Contributor The Nigh Law Group LLC			Registration Number, if PAC	
Street Address 115 West Main Street, Suite 300A		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 02/06/2018
City Columbus		State OH	Zip Code 43215	Amount 500.00
Form (Cash, Check, Etc) check				
Full Name of Contributor Newhouse Prophater Kolman & Hogan			Registration Number, if PAC	
Street Address 5025 Arlington Centre Blvd., Suite 400		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 02/06/2018
City Columbus		State OH	Zip Code 43220	Amount 150.00
Form (Cash, Check, Etc) check				
Full Name of Contributor Vickie J. Murphy			Registration Number, if PAC	
Street Address 1536 Bendelow Drive		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 02/06/2018
City Columbus		State OH	Zip Code 43228	Amount 150.00
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
15,135.00

Total Expenditures This Event
2,846.92

Page Total \$ 1,050.00