

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			Registration Number, if PAC	
Robert J. Behal				
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
2531 Brentwood Road			02/06/2018	600.00
City	State	Zip Code	Form (Cash, Check, Etc	
Bexley	OH	43209	check	
Full Name of Contributor			Registration Number, if PAC	
John P. Johnson Law Office LLC				
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
501 South High Street			02/06/2018	150.00
City	State	Zip Code	Form (Cash, Check, Etc	
Columbus	OH	43215	check	
Full Name of Contributor			Registration Number, if PAC	
Robert N. Burman				
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
580 South High Street			02/06/2018	400.00
City	State	Zip Code	Form (Cash, Check, Etc	
Columbus	OH	43215	check	
Full Name of Contributor			Registration Number, if PAC	
Ronnie Burman				
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
580 South High Street			02/06/2018	400.00
City	State	Zip Code	Form (Cash, Check, Etc	
Columbus	OH	43215	check	
Full Name of Contributor			Registration Number, if PAC	
Kenneth R. Kline				
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
973 North 6th Street			02/06/2018	150.00
City	State	Zip Code	Form (Cash, Check, Etc	
Columbus	OH	43201	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 \$1,700.00