

31-E

R.C. 3517.10(B)

Event Date 5/23/12

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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 Reminger Co., LPA Ohio Political Action Committee				Registration Number, if PAC CP 495				
Street Address 1400 Midland Bldg, 101 prospect Ave. W		Employer/Occupation/Labor Organization*		M 0	D 5	Y 2	Y 2	Amount \$100.00
City Cleveland		State OH	Zip Code 44115	Form (Cash, Check, etc.) check				
Full Name of Contributor Maria Armstrong				Registration Number, if PAC				
Street Address 872 Pipestone Drive		Employer/Occupation/Labor Organization* Attorney		M 0	D 5	Y 2	Y 3	Amount \$250.00
City Columbus		State OH	Zip Code 43235	Form (Cash, Check, etc.) check				
Full Name of Contributor John Birath				Registration Number, if PAC				
Street Address 1157 Worthington Heights Blvd.		Employer/Occupation/Labor Organization* Attorney		M 0	D 5	Y 2	Y 3	Amount \$250.00
City Columbus		State OH	Zip Code 43235	Form (Cash, Check, etc.) check				
Full Name of Contributor Doug Shevelow				Registration Number, if PAC				
Street Address 8688 Cedar Brook Street		Employer/Occupation/Labor Organization* Attorney - Bricker & Eckler		M 5	D 2	Y 3	Y 1	Amount \$100.00
City Pickerington		State OH	Zip Code 43147	Form (Cash, Check, etc.) check				
Full Name of Contributor Mark Schumacher				Registration Number, if PAC				
Street Address 6575 Baronscourt Loop		Employer/Occupation/Labor Organization* Freund, Freeze & Arnold		M 0	D 5	Y 2	Y 2	Amount \$100.00
City Dublin		State OH	Zip Code 43016	Form (Cash, Check, etc.) check				
Full Name of Contributor Kimball Carey				Registration Number, if PAC				
Street Address 58 Pembroke Lane		Employer/Occupation/Labor Organization* Attorney		M 0	D 5	Y 2	Y 2	Amount \$50.00
City Granville		State OH	Zip Code 43023	Form (Cash, Check, etc.) check				
Full Name of Contributor Pat Spriggs				Registration Number, if PAC				
Street Address 3267 Hoover Road		Employer/Occupation/Labor Organization*		M 0	D 5	Y 2	Y 2	Amount \$30.00
City Grove City		State OH	Zip Code 43123	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

\$7,155.00

Total expenditures this event.

\$0.00

Page Total \$ 880.00