



**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 William Dana Lavelle | | | Registration Number, if PAC | |
| Street Address 12190 Taylor Road | Employer/Occupation/Labor Organization* | | Date (MM/DD/YYYY) 01/12/2018 | Amount 150.00 |
| City Plain City | State OH | Zip Code 43064 | Form (Cash, Check, Etc) check | |
| Full Name of Contributor Gregg Lewis | | | Registration Number, if PAC | |
| Street Address 625 City Park Avenue | Employer/Occupation/Labor Organization* | | Date (MM/DD/YYYY) 01/12/2018 | Amount 200.00 |
| City Columbus | State OH | Zip Code 43206 | Form (Cash, Check, Etc) check | |
| Full Name of Contributor Robert A. Koblentz | | | Registration Number, if PAC | |
| Street Address 35 East Livingston Avenue | Employer/Occupation/Labor Organization* | | Date (MM/DD/YYYY) 01/17/2018 | Amount 200.00 |
| City Columbus | State OH | Zip Code 43215 | Form (Cash, Check, Etc) check | |
| Full Name of Contributor Einstein Law, LLC | | | Registration Number, if PAC | |
| Street Address 615 Copeland Mill Road, Suite 1H | Employer/Occupation/Labor Organization* | | Date (MM/DD/YYYY) | Amount 150.00 |
| City Westerville | State OH | Zip Code 43081 | Form (Cash, Check, Etc) check | |
| Full Name of Contributor Weis & O'Connor LLC | | | Registration Number, if PAC | |
| Street Address 22 East Gay Street, Suite 401 | Employer/Occupation/Labor Organization* | | Date (MM/DD/YYYY) 01/23/2018 | Amount 300.00 |
| City Columbus | State OH | Zip Code 43215 | 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
15,135.00

Total Expenditures This Event
2,846.92

Page Total \$ 1,000.00