

31-E  
R.C. 3517.10(B)

Event Date 3/28/2018  
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# Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 02/01

Name of Committee in Full <b>Committee for Kim Brown for Judge</b>				
Full Name of Contributor <b>IBEW 683 PCE</b>			Registration Number, if PAC	
Street Address <b>939 Goodale Blvd, Suite 100</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   3   2   2   1   8</b>	Amount <b>250.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43212</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Mary Barley-McBride</b>			Registration Number, if PAC	
Street Address <b>5124 Claridge Drive</b>	Employer/Occupation/Labor Organization* <b>Attorney</b>		M   D   Y <b>0   3   2   6   1   8</b>	Amount <b>250.00</b>
City <b>New Albany</b>	State <b>O   H</b>	Zip Code <b>43054</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Jon Saia</b>			Registration Number, if PAC	
Street Address <b>713 S. Front Street</b>	Employer/Occupation/Labor Organization* <b>Attorney</b>		M   D   Y <b>0   3   2   8   1   8</b>	Amount <b>200.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>**Jeffrey M. Basnett</b>			Registration Number, if PAC	
Street Address <b>330 S. High Street</b>	Employer/Occupation/Labor Organization* <b>Attorney</b>		M   D   Y <b>0   3   2   9   1   8</b>	Amount <b>250.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>**Thomas Waldeck</b>			Registration Number, if PAC	
Street Address <b>1027 Peggys Cv</b>	Employer/Occupation/Labor Organization* <b>Attorney</b>		M   D   Y <b>0   3   2   8   1   8</b>	Amount <b>250.00</b>
City <b>Reynoldsburg</b>	State <b>O   H</b>	Zip Code <b>43068</b>	Form(Cash,Check,etc) <b>Check</b>	
Full Name of Contributor <b>Ohioans for Justice</b>			Registration Number, if PAC	
Street Address <b>89 E. Nationwide Blvd</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   3   2   8   1   8</b>	Amount <b>200.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Counter Check</b>	
Full Name of Contributor <b>**Thomas F. Charlesworth</b>			Registration Number, if PAC	
Street Address <b>765 South High Street</b>	Employer/Occupation/Labor Organization* <b>Attorney</b>		M   D   Y <b>0   3   2   8   1   8</b>	Amount <b>250.00</b>
City <b>Columbus</b>	State <b>O   H</b>	Zip Code <b>43026</b>	Form(Cash,Check,etc) <b>Check</b>	

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, occupation 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 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

Total expenditures this event

Page Total \$ 1,650.00

\*\* On appointed committee