31-E
R.C. 3517.10(B)

Statement of Contributions Received
at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Event Date 3/8/12

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Name of Committee in Full
Committee for Kim Brown for Judge

Full Name of Contributor			Registration Number, if PAC				
Patrick M. Fleming							

Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
2128 Poplar Street			0 3	0 8	1 2	$100.00

City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43207	check

Full Name of Contributor			Registration Number, if PAC
Richard B. Neal, Jr.			

Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount
982 Jaeger Street			0 3	0 8	1 2	$100.00

City	State	Zip Code	Form (Cash, Check, etc.)
Columbus	OH	43206	check

Full Name of Contributor			Registration Number, if PAC

Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount

City	State	Zip Code	Form (Cash, Check, etc.)
	OH		

Full Name of Contributor			Registration Number, if PAC

Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount

City	State	Zip Code	Form (Cash, Check, etc.)
	OH		

Full Name of Contributor			Registration Number, if PAC

Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount

City	State	Zip Code	Form (Cash, Check, etc.)
	OH		

Full Name of Contributor			Registration Number, if PAC

Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount

City	State	Zip Code	Form (Cash, Check, etc.)
	OH		

Full Name of Contributor			Registration Number, if PAC

Street Address	Employer/Occupation/Labor Organization*		M	D	Y	Amount

City	State	Zip Code	Form (Cash, Check, etc.)
	OH		

* 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

$800.00

Total expenditures this event.

$234.00

Page Total $ **$200.00**