

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>REELECT JUDGE BROWNE! (RJB)</b>							
Full Name of Contributor <b>MARTY ANDERSON</b>				Registration Number, if PAC			
Street Address <b>3409 RIVER SEINE ST.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	0	100.00
City <b>COLUMBUS</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43221</b>	Form(Cash,Check,etc) <b>CHECK</b>			
Full Name of Contributor <b>BEHAL LAW GROUP</b>							
Full Name of Contributor <b>BEHAL LAW GROUP</b>				Registration Number, if PAC			
Street Address <b>501 S. HIGH ST.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
		<b>BY ROBERT BEHAL</b>		0	1	2	500.00
City <b>COLUMBUS</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>CHECK</b>			
Full Name of Contributor <b>ROBERT BERGMAN* (COURT APPOINTED ATTORNEY)</b>							
Full Name of Contributor <b>ROBERT BERGMAN* (COURT APPOINTED ATTORNEY)</b>				Registration Number, if PAC			
Street Address <b>3099 SULLIVANT AVE.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
		<b>BERGMAN &amp; YIANGOU</b>		0	1	2	100.00
City <b>COLUMBUS</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43221</b>	Form(Cash,Check,etc) <b>CHECK</b>			
Full Name of Contributor <b>BLYTHE BETHEL</b>							
Full Name of Contributor <b>BLYTHE BETHEL</b>				Registration Number, if PAC			
Street Address <b>400 S. FIFTH ST., STE. 303</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	1	2	100.00
City <b>COLUMBUS</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>CHECK</b>			
Full Name of Contributor <b>ANGELA ALBERT BROWN</b>							
Full Name of Contributor <b>ANGELA ALBERT BROWN</b>				Registration Number, if PAC			
Street Address <b>536 S. HIGH ST.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	1	2	100.00
City <b>COLUMBUS</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>CHECK</b>			
Full Name of Contributor <b>JAMES BROWN</b>							
Full Name of Contributor <b>JAMES BROWN</b>				Registration Number, if PAC			
Street Address <b>580 S. HIGH ST., STE. 200</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	1	2	100.00
City <b>COLUMBUS</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>CHECK</b>			
Full Name of Contributor <b>JEFFREY BROWN</b>							
Full Name of Contributor <b>JEFFREY BROWN</b>				Registration Number, if PAC			
Street Address <b>580 S. HIGH ST., STE. 200</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	1	2	100.00
City <b>COLUMBUS</b>		State <b>O</b>   <b>H</b>	Zip Code <b>43215</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, 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 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  
5,575.00

Total expenditures this event  
304.86

Page Total \$ 1,100.00