

31-E

R.C. 3517.10(B)

Event Date 4/3/12

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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 Andrea R. Yagoda					Registration Number, if PAC				
Street Address 2000 Henderson Rd, Ste 250		Employer/Occupation/Labor Organization*			M	D	Y	Amount	
City Columbus		State OH	Zip Code 43220		0	4	0	3	12
					Form (Cash, Check, etc.) check				
Full Name of Contributor Wilbur N. Ischie					Registration Number, if PAC				
Street Address 110 Buttrick Avenue		Employer/Occupation/Labor Organization*			M	D	Y	Amount	
City Columbus		State OH	Zip Code 43215		0	4	0	3	12
					Form (Cash, Check, etc.) check				
Full Name of Contributor Portman Foley & Flint LLP					Registration Number, if PAC				
Street Address 471 E. Broad St., Ste 1820		Employer/Occupation/Labor Organization*			M	D	Y	Amount	
City Columbus		State OH	Zip Code 43215		0	4	0	3	12
					Form (Cash, Check, etc.) check				
Full Name of Contributor I.B.E.W. - C.O.P.E.					Registration Number, if PAC				
Street Address 900 Seventh Street, NW		Employer/Occupation/Labor Organization*			M	D	Y	Amount	
City Washington		State OH	Zip Code 20001		0	4	0	3	12
					Form (Cash, Check, etc.) check				
Full Name of Contributor Vorys Sater Seymour and Pease LLP					Registration Number, if PAC OH109				
Street Address 52 E. Gay Street		Employer/Occupation/Labor Organization*			M	D	Y	Amount	
City Columbus		State OH	Zip Code 43215		0	4	0	3	12
					Form (Cash, Check, etc.) check				
Full Name of Contributor L. Martin Codero					Registration Number, if PAC				
Street Address 1610 McCoy Road		Employer/Occupation/Labor Organization*			M	D	Y	Amount	
City Upper Arlington		State OH	Zip Code 43220		0	4	0	3	12
					Form (Cash, Check, etc.) cash				
Full Name of Contributor Lori M. Tyack					Registration Number, if PAC				
Street Address 4080 Chelsea Bridge Lane		Employer/Occupation/Labor Organization*			M	D	Y	Amount	
City Gahanna		State OH	Zip Code 43230		0	4	0	3	12
					Form (Cash, Check, etc.) cash				

* 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

\$2,700.00

Total expenditures this event.

\$0.00

Page Total \$2,000.00