

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee for Chris Brown for Judge						
Full Name of Contributor Krapenc Law Office					Registration Number, if PAC	
Street Address 601 S. High St.		Employer/Occupation/Labor Organization Law Firm			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 1	Y 3	Amount \$1,000.00
Full Name of Contributor Total Contributions from Form 31-E					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
City	State OH	Zip Code	M 0	D 2	Y 1	Amount \$1,765.00
Full Name of Contributor Omitted due to editing					Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)	
City	State OH	Zip Code	M	D	Y	Amount
Full Name of Contributor Jason Kester					Registration Number, if PAC	
Street Address 2284 Breeze Hill Dr.		Employer/Occupation/Labor Organization Attorney			Form (Cash, Check, etc.) Check	
City Grove City	State OH	Zip Code 43123	M 0	D 2	Y 1	Amount \$100.00
Full Name of Contributor Jeremy Dodgion					Registration Number, if PAC	
Street Address 1188 South High St.		Employer/Occupation/Labor Organization Attorney			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	M 0	D 2	Y 1	Amount \$200.00
Full Name of Contributor E. Scott Shaw					Registration Number, if PAC	
Street Address 500 South Front St., Suite 130		Employer/Occupation/Labor Organization Attorney			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 2	Y 1	Amount \$100.00
Full Name of Contributor Michael Silberstein					Registration Number, if PAC	
Street Address 1093 Fountain Ln., Apt D		Employer/Occupation/Labor Organization Insurance Agent			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43213	M 0	D 2	Y 1	Amount \$100.00
Full Name of Contributor Toure McCord					Registration Number, if PAC	
Street Address 844 S. Front St.		Employer/Occupation/Labor Organization Attorney			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43206	M 0	D 3	Y 1	Amount \$100.00

* 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)]