

Event Date	02/20/2018	Page 5

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

Form 31-E R.C. 3517.10(B)

Full Name of Committee	·				11.0. 5511.10(5)
Committee to Elect McCaughan for Judge					
Full Name of Contributor			Registration Number, if PAC		
John P. Johnson Law Office LLC (John P. J	lohnson)				
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
501 S. High St.				02/20/2018	\$150.00
City	[5	State	Zip Code	Form (Cash, Check, Etc	Andrew Color of the American Color of the Co
Columbus	d	ОН	43215	check	
Full Name of Contributor			<u> </u>	Registration Number, if PAC	
Nancy Johnson					
Street Address	Employer	/Occupa	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
1199 Lake Shore Dr.				02/20/2018	\$150.00
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus		ЭН	43204	check	
Full Name of Contributor			Registration Number, if PAC	See 611 (1919) (1919)	
Teresa English					
Street Address	Employer	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
1319 B Lake Shore Dr				02/20/2018	\$200.00
City	5	State	Zip Code	Form (Cash, Check, Etc	
Columbus		ЭН	43204	check	
Full Name of Contributor				Registration Number, if PAC	Annual Control of the
Chris Eckert					
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
1 Woodland Ave		02/20/2018	\$125.00		
City	S	State	Zip Code	Form (Cash, Check, Etc	
Columbus	C	ЭH	43203	check	
Full Name of Contributor				Registration Number, if PAC	
Carrie Glaeden					
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
1209 B Lake Shore Dr				02/20/2018	\$125.00
City	s	State	Zip Code	Form (Cash, Check, Etc	Accompany of the second of the
Columbus	c	ЭН	43204	check	
* Commissed for a contributions from individuals according		10		16 16 15 16 1	

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	Contri	butions	This	Event

Total	Expenditures	This	Event

Page	e Total \$	

^{*} 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)]