

# FOR PAPER FILING ONLY

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

Prescribed by Secretary of State 03/05

Event Date **02/16/17**  
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Name of Committee in Full <b>Committee to Elect Morgan Masters</b>				
Full Name of Contributor <b>Caitlin Chamberlain</b>			Registration Number, if PAC	
Street Address <b>224 E. Mithoff St.</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   2   1   6   1   7</b>	Amount <b>100.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43206</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Greg's Graphics, LLC</b>			Registration Number, if PAC	
Street Address <b>4248 Kelnor Dr.</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   2   1   6   1   7</b>	Amount <b>600.00</b>
City <b>Grove City</b>	State <b>OH</b>	Zip Code <b>43123</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Randall Masters</b>			Registration Number, if PAC	
Street Address <b>471 Whetstone River</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   2   1   6   1   7</b>	Amount <b>100.00</b>
City <b>Caledonia</b>	State <b>OH</b>	Zip Code <b>43314</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Scott &amp; Nolder Co., LPA -- Steve Nolder</b>			Registration Number, if PAC	
Street Address <b>35 E. Livingston Ave.</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   2   1   6   1   7</b>	Amount <b>500.00</b>
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Check</b>	
Full Name of Contributor <b>Ben Miller</b>			Registration Number, if PAC	
Street Address <b>1535 Marion-Williamsport Rd. E</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   2   1   6   1   7</b>	Amount <b>100.00</b>
City <b>Marion</b>	State <b>OH</b>	Zip Code <b>43302</b>	Form (Cash, Check, etc.) <b>Cash</b>	
Full Name of Contributor <b>Luther Miller</b>			Registration Number, if PAC	
Street Address <b>1535 Marion-Williamsport Rd. E</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   2   1   6   1   7</b>	Amount <b>100.00</b>
City <b>Marion</b>	State <b>OH</b>	Zip Code <b>43302</b>	Form (Cash, Check, etc.) <b>Cash</b>	
Full Name of Contributor <b>Julie Miller</b>			Registration Number, if PAC	
Street Address <b>1535 Marion-Williamsport Rd. E</b>	Employer/Occupation/Labor Organization*		M   D   Y <b>0   2   1   6   1   7</b>	Amount <b>100.00</b>
City <b>Marion</b>	State <b>OH</b>	Zip Code <b>43302</b>	Form (Cash, Check, etc.) <b>Cash</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 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

0.00

Total expenditures this event.

0.00

Page Total \$ **1600.00**