

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

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Morehart for Judge</b>							
Full Name of Contributor <b>Jeffrey Kaplan</b>				Registration Number, if PAC			
Street Address <b>7373 Christie Chapel Rd.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	8	2	50.00
City <b>Dublin</b>		State <b>O</b>	H	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>Check</b>		
Full Name of Contributor <b>James Gilbert</b>				Registration Number, if PAC			
Street Address <b>4025 Riverview Dr.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	8	2	200.00
City <b>Columbus</b>		State <b>O</b>	H	Zip Code <b>43221</b>	Form(Cash,Check,etc) <b>Check</b>		
Full Name of Contributor <b>Richard Gerber</b>				Registration Number, if PAC			
Street Address <b>6125 Karrer pl.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	8	2	150.00
City <b>Dublin</b>		State <b>O</b>	H	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>Check</b>		
Full Name of Contributor <b>Greg Finnerty</b>				Registration Number, if PAC			
Street Address <b>66 E. Lynn St.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	8	2	250.00
City <b>Columbus</b>		State <b>O</b>	H	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>		
Full Name of Contributor <b>Jon Cope</b>				Registration Number, if PAC			
Street Address <b>3600 Olentangy River Rd.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	8	2	150.00
City <b>Columbus</b>		State <b>O</b>	H	Zip Code <b>43214</b>	Form(Cash,Check,etc) <b>Check</b>		
Full Name of Contributor <b>Marilee Chinnici-Zuercher</b>				Registration Number, if PAC			
Street Address <b>6043 Glenbarr Pl.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	8	2	200.00
City <b>Dublin</b>		State <b>O</b>	H	Zip Code <b>43017</b>	Form(Cash,Check,etc) <b>Check</b>		
Full Name of Contributor <b>Joel Campbell</b>				Registration Number, if PAC			
Street Address <b>575 S. Third St.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	8	2	125.00
City <b>Columbus</b>		State <b>O</b>	H	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 b 0

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

**3,225**

Total expenditures this event

**537.50**

Page Total \$ **1,125.00**