Page



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

Form 31-E

Frent Date 4-21-17

R.C. 3517.10(B)

Full Name of Committee				•
Committee	to elec	t George	Registration Number, if PA	Judge
Full Name of Contributor		0	Registration Number, if PA	c O
Marcus Van Wey L	. L. C.			
Street Address St. いなころ	Employer/Occupa	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
1550 Old Henderson Rd.			06/21/200	7 \$50.00
City	State	Zip Code	Form (Cash, Check, Etc	
Columbus	он	43220	check	
Full Name of Contributor THIS L.L.C.			Registration Number if P	C
Joseph Donatasiah Don	h-a:()'	200 220 100 1	1.1	
Jason Despetorich, Desc Street Address	Employer/Occupa	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
100 E. Main St.			010/21/201	7 \$100.00
City	State	Zip Code	Olo 21/20 Form (Cash, Check, Etc	
Columbus	он	43215	check	
Full Name of Contributor		<u> </u>	Registration Number, if PA	C
Paul Morrison				
Street Address	Employer/Occupa	ntion/Labor Organization*	Date (MM/DD/YYYY)	Amount
1001 Esther Dr.			Old 21/2017 Form (Cash, Check, Etc	\$ 50.00
City	State	Zip Code	Form (Cash, Check, Etc	
Columbus	ОН	43207	check	
Full Name of Contributor			Registration Number, if PA	iC
Paul Morrison				
Street Address	Employer/Occupa	ntion/Labor Organization*	Date (MM/DD/YYYY)	Amount
1001 Esther Dr.			06/21/2017	\$ \$50.00
City	State	Zip Code	Form (Cash, Check, Etc	
Columbus	ОН	43207	Cash	
Full Name of Contributor			Registration Number, if PA	vC
Kathy Isem				
Street Address	Employer/Occupa	ation/Labor Organization*	Date (MM/DD/YYYY)	Amount
75 E. Waterview Dr			06/21/201	7 \$100.00
City	State	Zip Code	Form (Cash, Check, Etc	10 Car 18 15 19
Shavnee Hills	ОН	43062	cash	
* Required for contributions from individuals over \$100 in name of the individual's business, if any, rather than em				

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 No. 31-E" and list the date of the event in the date column

Total	Contributions	This	Even

otal Expenditures This Event

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