

Event	Date	

## 12/10/2019

Page 13

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

Form 31-E

C 3517 10/B

Full Name of Committee					K.C. 3517.10(B)
Sheryl Munson for Judge Committee					
Full Name of Contributor			Registration Number, if PAC		
P. Zach Olah					
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
7637 Dover Ridge Dr.				12/10/2019	100
City		State	Zip Code	Form (Cash, Check, Etc	
Blacklick		ОН	43004	Cash	
Full Name of Contributor		1	Registration Number, if PAC		
Jen Davies					
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
3646 Lightston Cir.				12/10/2019	100
City	1	State	Zip Code	Form (Cash, Check, Etc	
Hilliard		ОН	43026	Cash	
Full Name of Contributor				Registration Number, if PAC	
Jen Baughman					
Street Address	Employe	r/Occupat	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
1161 Blackberry				12/10/2019	25.00
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus OH 43206		Cash			
Full Name of Contributor		Registration Number, if PAC			
Mary Kurila					
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
49 Tibet Rd.				12/10/2019	100
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus	ĺ	ОН	43202	Cash	
Full Name of Contributor		Registration Number, if PAC			
Tia Schmitz					
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
161 E. Markison Ave.				12/10/2019	25
City	1	State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43207	Cash	
* Required for contributions from individuals over \$100	to etetovid	lo and Ca	posel Assembly condide	les lé soudibutes is selé soudeur	d the committee and the

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

<b>Total Contributions</b>	This	Event
8095		

Total Expenditures	This Event
00	

Page Total \$ 350	
rage rotal \$	

<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is setf-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)]