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

Event Date 10/27/15	
Page 4 4	

Name of Committee in Full Mott & Pleasnick					_			
Full Name of Contributor					_			
Craig Mohre					Registration Number, if PAC			
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ity New Albany	State OH	Zip Code 43054	!'	(Cash, C				
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	Employer/Occup	Employer, Occupation/Labor Organization*		D	Y	Amount		
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uired for contributions from individuals over \$1 ndividual's business, if any, rather than employer rorganization of which the employees are memb	00 to statewide and General Assetshould be listed. If two or more		or is self-empl oll deduction	oyed, th	e occuped the	pation and the na aggregate of \$10		

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Hour form 140. 51-12 and fist the date of the eve
Page Total \$ \$200.0