

## 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>Randolph Roth</b>				Registration Number, if PAC	
Street Address <b>6987 Grandee Cliffs Dr.</b>		Employer/Occupation/Labor Organization*		M	D
				0	8
City <b>Dublin</b>		State <b>O</b>	Zip Code <b>43016</b>	Y	Amount
		<b>H</b>		1	50.00
				7	
Form(Cash,Check,etc) <b>Check</b>					
Full Name of Contributor <b>David Rieser</b>					
Street Address <b>2 Miranova Pl., Suite 710</b>				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M	D	Y	Amount
		0	8	1	200.00
City <b>Columbus</b>		State <b>O</b>	Zip Code <b>43215</b>	7	
		<b>H</b>			
Form(Cash,Check,etc) <b>Check</b>					
Full Name of Contributor <b>Shawn Parker</b>					
Street Address <b>9003 Turfway Bend Dr.</b>				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M	D	Y	Amount
		0	8	1	50.00
City <b>Powell</b>		State <b>O</b>	Zip Code <b>43065</b>	7	
		<b>H</b>			
Form(Cash,Check,etc) <b>Check</b>					
Full Name of Contributor <b>Timothy Mitchell</b>					
Street Address <b>4919 Lytfield Dr.</b>				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M	D	Y	Amount
		0	8	1	150.00
City <b>Dublin</b>		State <b>O</b>	Zip Code <b>43017</b>	7	
		<b>H</b>			
Form(Cash,Check,etc) <b>Check</b>					
Full Name of Contributor <b>Luther Liggett</b>					
Street Address <b>5053 Grassland Dr.</b>				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M	D	Y	Amount
		0	8	1	100.00
City <b>Dublin</b>		State <b>O</b>	Zip Code <b>43016</b>	7	
		<b>H</b>			
Form(Cash,Check,etc) <b>Check</b>					
Full Name of Contributor <b>Charles Kranstuber</b>					
Street Address <b>5512 Caplestone Lane</b>				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M	D	Y	Amount
		0	8	1	100.00
City <b>Dublin</b>		State <b>O</b>	Zip Code <b>43017</b>	7	
		<b>H</b>			
Form(Cash,Check,etc) <b>Check</b>					
Full Name of Contributor <b>Brenda Kocak</b>					
Street Address <b>24 Darby St.</b>				Registration Number, if PAC	
Employer/Occupation/Labor Organization*		M	D	Y	Amount
		0	8	1	125.00
City <b>Dublin</b>		State <b>O</b>	Zip Code <b>43017</b>	7	
		<b>H</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 \$ 775.00