

# FOR PAPER FILING ONLY

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

Prescribed by Secretary of State 03/05

Event Date **03/23/17**

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Name of Committee in Full <b>Committee to Elect Morgan Masters</b>							
Full Name of Contributor <b>Michelle McCarty</b>				Registration Number, if PAC			
Street Address <b>2674 Dartmoor Rd.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2	50.00
City <b>Grove City</b>		State <b>OH</b>	Zip Code <b>43123</b>	Form (Cash, Check, etc.) <b>Check</b>			
Full Name of Contributor <b>Nikki Churchill</b>				Registration Number, if PAC			
Street Address <b>150 E. Mound St.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2	100.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Cash</b>			
Full Name of Contributor <b>Brian Joslyn</b>				Registration Number, if PAC			
Street Address <b>501 S. High St.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2	100.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Cash</b>			
Full Name of Contributor <b>Cassidy Calkins</b>				Registration Number, if PAC			
Street Address <b>2036 Lublin Dr., Apt. H</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2	100.00
City <b>Reynoldsburg</b>		State <b>OH</b>	Zip Code <b>43068</b>	Form (Cash, Check, etc.) <b>Cash</b>			
Full Name of Contributor <b>Karen Phipps</b>				Registration Number, if PAC			
Street Address <b>3807 Lakeland Dr.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2	100.00
City <b>Hilliard</b>		State <b>OH</b>	Zip Code <b>43026</b>	Form (Cash, Check, etc.) <b>Cash</b>			
Full Name of Contributor <b>Jen Bangleman</b>				Registration Number, if PAC			
Street Address <b>375 S. High St.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2	20.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Cash</b>			
Full Name of Contributor <b>Rena Passas</b>				Registration Number, if PAC			
Street Address <b>375 S. High St.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	3	2	20.00
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43215</b>	Form (Cash, Check, etc.) <b>Cash</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 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 form No. 31-E" and list the date of the event in the date column

Total contributions this event

0.00

Total expenditures this event.

0.00

Page Total \$ **490.00**