

09 14 17 Page 2

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

Form 31-E

R.C. 3517.10(B)

Full Name of Committee	• • • • • • • • • • • • • • • • • • • •		 		
COMMITTEE TO ELECT MORGAN MASTE	ER				
Full Name of Contributor			Registration Number, if PAC		
Martin Noble					
Street Address	Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
6048 Glade Run Court				09 14 17	100.00
City		State	Zip Code	Form (Cash, Check, Etc	105 11 44 1 10 10 10 10 10 10 10 10 10 10 10 10 10 1
Hilliard	C	OH	43026	Check	A the part of
Full Name of Contributor				Registration Number, if PAC	SWAM AND DESCRIPTION OF THE PROPERTY OF THE PR
Gregory Finnerty					
Street Address	Employer	/Occupat	ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
6013 Round Tower Ln.				09 14 17	150.00
City		State	Zip Code	Form (Cash, Check, Etc	and the second s
Dublin	C	ОН	43017	Check	
Full Name of Contributor				Registration Number, if PAC	Pathingushidase Ret Co Spatiented et allegan was a management
Jennifer Brown					
Street Address	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount	
968 Euclaire Ave				09 14 17	100.00
City		State	Zip Code	Form (Cash, Check, Etc	
Bexley	C	ЭН	43209	Check	### 1
Full Name of Contributor			Registration Number, if PAC		
Lawrence Reihl LLC					
Street Address	Employer/Occupation/Labor Organization		Date (MM/DD/YYYY)	Amount	
500 S. Front St				09 14 17	100.00
City		State	Zip Code	Form (Cash, Check, Etc	g distribution
Columbus		HC	43206	Check	
Full Name of Contributor			Registration Number, if PAC		
Paul Scott LPA					
Street Address	Employer/Occupation/Labor Organization*		ion/Labor Organization*	Date (MM/DD/YYYY)	Amount
536 S. High St.				09 14 17	250.00
City		State	Zip Code	Form (Cash, Check, Etc	
Clumbus	C	OH.	43215	Check	

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	Contribution	s TI	nis	Even	t

Total Expenditures	This	Event

	700.00
1	Page Total \$
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^{*} 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)]