

Event Date 12/10/15

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## 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>Mary Woods</b>				Registration Number, if PAC			
Street Address <b>1022 Blind Brook Dr.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>1</b>	<b>2</b>	<b>1</b>	<b>50.00</b>
City <b>Columbus</b>	State <b>O</b>	H	Zip Code <b>43235</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Rick Vassy</b>				Registration Number, if PAC			
Street Address <b>145 E. Rich St., 2nd Flr.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>1</b>	<b>2</b>	<b>1</b>	<b>300.00</b>
City <b>Columbus</b>	State <b>O</b>	H	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Julie Van De Mark</b>				Registration Number, if PAC			
Street Address <b>492 City Park Ave.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>1</b>	<b>2</b>	<b>1</b>	<b>100.00</b>
City <b>Columbus</b>	State <b>O</b>	H	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Gerald Sunbury</b>				Registration Number, if PAC			
Street Address <b>250 Civic Center Dr.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>1</b>	<b>2</b>	<b>1</b>	<b>100.00</b>
City <b>Columbus</b>	State <b>O</b>	H	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Ira Sully</b>				Registration Number, if PAC			
Street Address <b>844 S. Front St.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>1</b>	<b>2</b>	<b>1</b>	<b>100.00</b>
City <b>Columbus</b>	State <b>O</b>	H	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Gregg Slemmer</b>				Registration Number, if PAC			
Street Address <b>1188 S. High St.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>1</b>	<b>2</b>	<b>1</b>	<b>200.00</b>
City <b>Columbus</b>	State <b>O</b>	H	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Marianne Sharp</b>				Registration Number, if PAC			
Street Address <b>133 E. Livingston Ave.</b>		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				<b>1</b>	<b>2</b>	<b>1</b>	<b>100.00</b>
City <b>Columbus</b>	State <b>O</b>	H	Zip Code <b>43215</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 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

**4,840.00**

Total expenditures this event

**0.00**

Page Total \$ **950.00**