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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	R				
Full Name of Contributor			Registration Number, if PAC		
Thomas Hayes Law Offices of Thomas Ha	ayes				
Street Address		Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
65 E. Livingston Ave				10 18 17	350.00
City	<u>. </u>	State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43215	Check	
Full Name of Contributor	<u></u>		<u></u>	Registration Number, if PAC	##### Office and City Company
Mark Miller, LLC					
Street Address	Employe	r/Occupat	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
555 City Park Ave.				10 18 17	150.00
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43215	Check	
Full Name of Contributor				Registration Number, if PAC	manager (A. Section of Benefit and the Control of Section of Secti
Eleana Drakatos					
Street Address	Employer/Occupation/Labor Organization*		tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
56 E. Russell				10 18 17	150.00
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus	,	ОН	43215	Check	
Full Name of Contributor				Registration Number, if PAC	
Richanne Zymkoski					
Street Address Employe		r/Occupat	tion/Labor Organization*	Date (MM/DD/YYYY)	Amount
2128 Poplar St.				10 18 17	150.00
City		State	Zip Code	Form (Cash, Check, Etc	
Columbus		ОН	43207	Check	
Full Name of Contributor				Registration Number, if PAC	
Troy Doucet					
Street Address Emplo		ployer/Occupation/Labor Organization*		Date (MM/DD/YYYY)	Amount
700 Stoneridge Parkway 2B	<u> </u>			10 18 17	100.00
City		State	Zip Code	Form (Cash, Check, Etc	
Dublin		ОН	43017	Check	
* Required for contributions from individuals over \$100	to statewic	de and Ge	eneral Assembly candida	tes. If contributor is self-employe	ed, the occupation and the

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

Total	Expenditures	This	Event

Page	Total \$	
1 3-		=

^{*} 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)]