



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 McCaughan for Judge				
Full Name of Contributor Wolinetz Law Office LLC (Barry Wolinetz)			Registration Number, if PAC	
Street Address 250 Civic Center Dr., Ste 220	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 03/27/2018	Amount \$250.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, Etc) check	
Full Name of Contributor Jennifer Harysh			Registration Number, if PAC	
Street Address 544 S. Front St., #105	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 03/27/2018	Amount \$20.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, Etc) cash	
Full Name of Contributor Nicole Pongonis			Registration Number, if PAC	
Street Address 712 Park St.	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 03/27/2018	Amount \$60.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, Etc) cash	
Full Name of Contributor Gavin Kelly			Registration Number, if PAC	
Street Address 333 E. Jeffrey Pl	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 03/27/2018	Amount \$100.00
City Columbus	State OH	Zip Code 43214	Form (Cash, Check, Etc) check	
Full Name of Contributor Jeffrey Pongonis			Registration Number, if PAC	
Street Address 712 Park St.	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 03/27/2018	Amount \$50.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, Etc) MC	

* 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

Total Expenditures This Event

Page Total \$ 480.00