



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 MASTER				
Full Name of Contributor Primas 1200 LLC			Registration Number, if PAC	
Street Address P.O. Box 1718	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09 14 17	Amount 100.00
City Powell	State OH	Zip Code 43065	Form (Cash, Check, Etc) Check	
Full Name of Contributor Colin McNamee			Registration Number, if PAC	
Street Address 4374 Ingham Ave.	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09 14 17	Amount 200.00
City Columbus	State OH	Zip Code 43214	Form (Cash, Check, Etc) Check	
Full Name of Contributor John Johnson Law Office			Registration Number, if PAC	
Street Address 501 S. High St.	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09 14 17	Amount 100.00
City Columbus	State OH	Zip Code 43215	Form (Cash, Check, Etc) Check	
Full Name of Contributor Thaddeus Boggs			Registration Number, if PAC	
Street Address 1843 N Star Rd.	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09 14 17	Amount 100.00
City Upper Arlington	State OH	Zip Code 43212	Form (Cash, Check, Etc) Check	
Full Name of Contributor Maguire and Schneider LLP (Deborah Rogers)			Registration Number, if PAC	
Street Address 1650 Lake Shore, Suite 150	Employer/Occupation/Labor Organization*		Date (MM/DD/YYYY) 09 14 17	Amount 250.00
City Columbus	State OH	Zip Code 43204	Form (Cash, Check, Etc) Check	

* 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 \$750.00