

## 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>Robert Krapenc</b>				Registration Number, if PAC	
Street Address <b>580 S. High St.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>1</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Cash</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Daniel Jones</b>				Registration Number, if PAC	
Street Address <b>2960 Wicklow Rd.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>1</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43204</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Nick Horne</b>				Registration Number, if PAC	
Street Address <b>118 Frankfort Sq.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>1</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43201</b>	Form(Cash,Check,etc) <b>Cash</b>		Amount <b>20.00</b>
Full Name of Contributor <b>Norma Grubb</b>				Registration Number, if PAC	
Street Address <b>700 Bower Hill Rd.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>1</b>
City <b>Pittsburgh</b>	State <b>P</b>	Zip Code <b>15243</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Teresa Edwards</b>				Registration Number, if PAC	
Street Address <b>909 S. High St.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>1</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43206</b>	Form(Cash,Check,etc) <b>Cash</b>		Amount <b>100.00</b>
Full Name of Contributor <b>Carole DePaola</b>				Registration Number, if PAC	
Street Address <b>4944 Buck Thorn Ln.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>1</b>
City <b>Columbus</b>	State <b>O</b>	Zip Code <b>43220</b>	Form(Cash,Check,etc) <b>Check</b>		Amount <b>75.00</b>
Full Name of Contributor <b>Sherman Alverson</b>				Registration Number, if PAC	
Street Address <b>206 Fountain Ave.</b>	Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>7</b>	Y <b>1</b>
City <b>Dayton</b>	State <b>O</b>	Zip Code <b>45408</b>	Form(Cash,Check,etc) <b>Cash</b>		Amount <b>100.00</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 b 0

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

**2,420**

Total expenditures this event

**210.00**

Page Total \$ **595.00**