

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full THE COMMITTEE TO ELECT DORRIS FOR JUDGE													
Full Name of Contributor JOHN T. CONROY						Registration Number, if PAC							
Street Address 3363 TREMONT RD, SUITE 104C			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK #6454						
City COLUMBUS		State O H		Zip Code 43221		M 0 3		D 2 2		Y 0 6		Amount 50.00	
Full Name of Contributor TOBY L. WAGNER						Registration Number, if PAC							
Street Address 253 KNIGHT DREAM STREET			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK #2251						
City DELAWARE		State O H		Zip Code 43015		M 0 3		D 1 7		Y 0 6		Amount 35.00	
Full Name of Contributor CONTRIBUTIONS FROM FORM 31-E						Registration Number, if PAC							
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)						
City		State		Zip Code		M 0 3		D 3 1		Y 0 6		Amount 1,431.25	
Full Name of Contributor WALLACE E. MARSHALL						Registration Number, if PAC							
Street Address 237 E. MINNESOTA AVE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK #3997						
City McCLOUD		State C A		Zip Code 96057		M 0 3		D 3 1		Y 0 6		Amount 50.00	
Full Name of Contributor T. A. STADERMAN						Registration Number, if PAC							
Street Address 30 EAST BROAD STREET			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CASH						
City COLUMBUS		State O H		Zip Code 43215		M 0 3		D 3 1		Y 0 6		Amount 20.00	
Full Name of Contributor ROBERT E. ARMSTRONG						Registration Number, if PAC							
Street Address 1863 WILLOWAY CIRCLE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK #2488						
City COLUMBUS		State O H		Zip Code 43220		M 0 3		D 3 1		Y 0 6		Amount 50.00	
Full Name of Contributor ALBERT SKORUPA						Registration Number, if PAC							
Street Address 539 OAKLAWN AVE			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK #2806						
City CRANSTON		State F L		Zip Code 02920		M 0 5		D 0 5		Y 0 6		Amount 100.00	
Full Name of Contributor MONROE P. BLACKWAE						Registration Number, if PAC							
Street Address 2413 M. L. KING JR. BLVD.			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) CHECK #6127						
City DALTON		State G A		Zip Code 37021-6659		M 0 4		D 0 5		Y 0 6		Amount 50.00	

* 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)]

Page Total \$ 1,786.25