

Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full THE COMMITTEE TO ELECT DORRIS FOR JUDGE							
Full Name of Contributor JEFF DICKEY				Registration Number, if PAC			
Street Address 47 BRANDON DR.		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	5	2	100.00
City COLUMBUS		State O H	Zip Code	Form(Cash,Check,etc) CASH			
Full Name of Contributor GEORGE W. FRANEY				Registration Number, if PAC			
Street Address 5477 SOMERSET ROAD		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	5	2	50.00
City THORNVILLE		State O H	Zip Code 43076	Form(Cash,Check,etc) CASH			
Full Name of Contributor JAMIE L. ALLEN				Registration Number, if PAC			
Street Address 68 WEST KOSSUTH ST.		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	5	2	50.00
City COLUMBUS		State O H	Zip Code 43206	Form(Cash,Check,etc) CHECK#1214			
Full Name of Contributor BRIAN E. CHORPENNING				Registration Number, if PAC			
Street Address 2540 LEEDS RD.		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	5	2	50.00
City UPPER ARLINGTON		State O H	Zip Code 43221	Form(Cash,Check,etc) CHECK#1127			
Full Name of Contributor KEVIN DURKIN - ATTORNEY AT LAW **				Registration Number, if PAC			
Street Address 471 EAST BROAD ST. SUITE 1100		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	5	2	50.00
City COLUMBUS		State O H	Zip Code 43215	Form(Cash,Check,etc) CHECK#5952			
Full Name of Contributor VERNON C. CHENEVEY				Registration Number, if PAC			
Street Address 2075 BROOKHURST AVE.		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	5	2	50.00
City COLUMBUS		State O H	Zip Code 43229	Form(Cash,Check,etc) CHECK#3495			
Full Name of Contributor STEVEN CLICK				Registration Number, if PAC			
Street Address 3170 BRIGHTINGTON DR.		Employer/Occupation/Labor Organization*		M	D	Y	Amount
				0	5	2	50.00
City DUBLIN		State O H	Zip Code 43017	Form(Cash,Check,etc) CHECK#1899			

* 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 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.

** DENOTES THIS PARTY IS A POSSIBLE APOINTEE FOR THE COMMON PLEAS COURT

Total contributions this event

Total expenditures this event

Page Total \$ 400.00