31-	E
R.C.	3517.10(B)

Event Date	12/9
Page	

## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05 Name of Committee in Full Serrott for Judge Registration Number, if PAC Full Name of Contributor Richard A. Frve Street Address Employer/Occupation/Labor Organization\* D Amount 0191110 200.00 1669 Roxbury Rd Zip Code Form(Cash, Check, etc) | H 43212 Check Upper Arlington Registration Number, if PAC John D. Moore Employer/Occupation/Labor Organization\* D 0|9|1|0 250.00 7918 Slate Ridge Blvd Zip Code Form(Cash Check etc) City 43068 Revnoldsburg Check Registration Number, if PAC Full Name of Contributor Ira B. Sully Street Address Employer/Occupation/Labor Organization\* 75.00 844 S. Front Street 1 2 0 9 1 0 City Form(Cash, Check, etc) State Zip Code  $O \mid H$ 43206 Check Columbus Registration Number if PAC Saker Law Offices, Theodore R. Saker Street Address Employer/Occupation/Labor Organization\* Amount 100.00 1 2 0 9 1 0 1374 King Ave City Zip Code Form(Cash,Check,etc) Columbus 43212 Check Registration Number, if PAC Law Office of Thomas F. Hayes LLC Employer/Occupation/Labor Organization\* D Y Amount 1 2 0 9 1 0 100.00 65 E. Livingston Ave City State Zip Code Form(Cash.Check.etc) Columbus 43215 Check Registration Number, if PAC Full Name of Contributor Todd W. Barstow Employer/Occupation/Labor Organization\* Amount 1 2 0 9 1 1 0 4185 E. Main Street 150.00 Form(Cash\_Check\_etc) City State Zip Code 43213 Check Property of the Columbus Full Name of Contributor Registration Number, if PAC Rebecca Gooch Attorney at Law Employer/Occupation/Labor Organization\* Amount 1 2 0 9 1 0 100.00 336 S. High Street

State

| H

Fill in the her	vaa halauu anb	on the last sace	for this event.

City

Columbus

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 \$ 975.00

Zip Code

43215

Form(Cash Check etc)

Check

<sup>\*</sup> 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)]