Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full	C EOD II II	OCE.					
THE COMMITTEE TO ELECT DORRIS FOR JUDGE					.1		
Full Name of Contributor MARTHA W. DORRIS			Regist	ration Nur	noer, 11 P	AC	
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Check, etc.)	
	Employer/Occup	batton/Labor Organization*					
320 W. PARK DRIVE	Guit	7'- 0-1-	1 37	T 5	1 37	CHECK # 0991	
City GREENVILLE	State O H	Zip Code 45331	M		Y	Amount 200.00	
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THOMAS E. DORRIS			Kegist	iauon nui	noer, ii F	AC .	
Street Address	Employer/Occur	pation/Labor Organization*				Form (Cash, Check, etc.)	
	Employer/Occupation/Dabor Organization				CHECK # 9811		
320 W. PARK DRIVE	State	Zip Code	М	D	Y	Amount	
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GREENVILLE	ОН	45331	0 5				
Full Name of Contributor Registration Number, if PAC							
CONTRIBUTIONS FROM FORM 31-E						F (0 0 1 1 1	
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Full Name of Contributor Registration Number, if PAC							
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Street Address	Employer/Occupation/Labor Organization* Form (Cash, Check, etc.			rom (Cash, Check, etc.)			
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City	State	Zip Code	M	D	Y	Amount	
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Page Total	\$ 500.77

^{*} 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)]