

# Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full					
SERROTT FOR JUDGE					
Full Name			Registration Number, if PAC		
MARK SERROTT					
Address		Type*	M	D	Y
789(A) N.W. Blvd		Loan	0	2	1
City		State	Zip Code		Amount
Cals O		O	43212		25 <sup>00</sup>
Form (Cash, Check, etc.)			TRANSFER		
Full Name			Registration Number, if PAC		
//					
Address		Type*	M	D	Y
			0	4	0
City		State	Zip Code		Amount
					25 <sup>00</sup>
Form (Cash, Check, etc.)			//		
Full Name			Registration Number, if PAC		
//					
Address		Type*	M	D	Y
			0	4	2
City		State	Zip Code		Amount
					8 <sup>00</sup>
Form (Cash, Check, etc.)			//		
Full Name			Registration Number, if PAC		
//					
Address		Type*	M	D	Y
			0	4	2
City		State	Zip Code		Amount
					10 <sup>00</sup>
Form (Cash, Check, etc.)			//		
Full Name			Registration Number, if PAC		
//					
Address		Type*	M	D	Y
			0	5	2
City		State	Zip Code		Amount
					12 <sup>00</sup>
Form (Cash, Check, etc.)			//		
Full Name			Registration Number, if PAC		
//					
Address		Type*	M	D	Y
			0	6	0
City		State	Zip Code		Amount
					65 <sup>00</sup>
Form (Cash, Check, etc.)			//		
Full Name			Registration Number, if PAC		
//					
Address		Type*	M	D	Y
			0	6	1
City		State	Zip Code		Amount
					25 <sup>00</sup>
Form (Cash, Check, etc.)			//		
Full Name			Registration Number, if PAC		
//					
Address		Type*	M	D	Y
			0	6	2
City		State	Zip Code		Amount
					5 <sup>00</sup>
Form (Cash, Check, etc.)			//		

\* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other Income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received. IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.