

Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full SERROTT FOR JUDGE				
Full Name MARK SERROTT		Type* Loan		Registration Number, if PAC
Address 789(A) NORTHWEST	Type*		M D Y 01 22 15	Amount 12⁰⁰
City COLUMBUS	State OH	Zip Code 43212	Form (Cash, Check, etc.) CASH	
Full Name //		Type* //		Registration Number, if PAC
Address	Type*		M D Y 02 17 15	Amount 20⁰⁰
City	State	Zip Code	Form (Cash, Check, etc.) //	
Full Name //		Type* //		Registration Number, if PAC
Address	Type*		M D Y 02 18 15	Amount 100⁰⁰
City	State	Zip Code	Form (Cash, Check, etc.) //	
Full Name //		Type* //		Registration Number, if PAC
Address	Type*		M D Y 02 25 15	Amount 12⁰⁰
City	State	Zip Code	Form (Cash, Check, etc.) //	
Full Name //		Type* //		Registration Number, if PAC
Address	Type*		M D Y 03 21 15	Amount 20⁰⁰
City	State	Zip Code	Form (Cash, Check, etc.) //	
Full Name //		Type* //		Registration Number, if PAC
Address	Type*		M D Y 04 22 15	Amount 20⁰⁰
City	State	Zip Code	Form (Cash, Check, etc.) //	
Full Name //		Type* //		Registration Number, if PAC
Address	Type*		M D Y 06 02 15	Amount 250⁰⁰
City	State	Zip Code	Form (Cash, Check, etc.) //	
Full Name //		Type* //		Registration Number, if PAC
Address	Type*		M D Y 06 23 15	Amount 10⁰⁰
City	State	Zip Code	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.