

# Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full				Registration Number, if PAC	
Serrott For Judge Committee					
Full Name of Contributor				Amount	
Luther L Liggett JR				\$250	
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	
5053 Grassland DR	attorney	1	2	0	2
City	State	Zip Code	Form (Cash, Check, etc.)		
Dublin	OH	43016	Check		
Full Name of Contributor				Registration Number, if PAC	
Steven A Larson					
Full Name of Contributor				Amount	
4967 Smoketalk Lane				\$250	
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	
4967 Smoketalk Lane	attorney	1	2	0	2
City	State	Zip Code	Form (Cash, Check, etc.)		
Westerville	OH	43081	Check		
Full Name of Contributor				Registration Number, if PAC	
Kenneth A Gamble					
Full Name of Contributor				Amount	
1845 Lake Shore DR				\$250	
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	
1845 Lake Shore DR	attorney	1	2	0	3
City	State	Zip Code	Form (Cash, Check, etc.)		
Columbus	OH	43204	Check		
Full Name of Contributor				Registration Number, if PAC	
Mark C Collins					
Full Name of Contributor				Amount	
492 S High ST				\$250	
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	
492 S High ST	attorney	1	2	0	3
City	State	Zip Code	Form (Cash, Check, etc.)		
Columbus	OH	43215	Check		
Full Name of Contributor				Registration Number, if PAC	
Donald S KLCO					
Full Name of Contributor				Amount	
700 MORSE Rd				\$250	
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	
700 MORSE Rd	attorney RETIRED	1	2	0	3
City	State	Zip Code	Form (Cash, Check, etc.)		
Columbus	OH	43214	Check		
Full Name of Contributor				Registration Number, if PAC	
Eric J Hoffman					
Full Name of Contributor				Amount	
2722 Bexley Park RD				\$250	
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	
2722 Bexley Park RD	attorney	1	2	0	3
City	State	Zip Code	Form (Cash, Check, etc.)		
Bexley	OH	43209	Check		
Full Name of Contributor				Registration Number, if PAC	
Hunter, Carnahan, Shoub & Byard					
Full Name of Contributor				Amount	
3360 Tremont Road				\$125	
Street Address	Employer/Occupation/Labor Organization*	M	D	Y	
3360 Tremont Road	attorney	1	2	0	1
City	State	Zip Code	Form (Cash, Check, etc.)		
Columbus	OH	43221	Check		

\* 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 also 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

Total contributions this event

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Total expenditures this event.

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Page Total \$

1,625