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In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full SERROTT FOR	JUD	0 <i>E</i>		
Full Name of Contributor SCOTT AND 100 SCOTT NOIDER ELC	Employer, Occupation	on, Labor Organization* TORNE YS	Registration	Number, if PAC
Name of Committee in Full SERROTT FOR Full Name of Contributor JOE SCOTT NOIDER LLC Street Address 65 & State St City Cols	Description of Item of FOOD - A Ic.	or Service Be Verages ohol FUL 12/3/15 FIRST	120	Fair Market Value
City Lo/5	Sta te	Zip Code 43215	Received at	Fundraising Event?
Full Name of Contributor	Employer, Occupati	on, Labor Organization*		Number, if PAC
Street Address	Description of Item (or Service	M	D Y Fair Market Value
City	Sta te	Zip Code	Received at	Fundraising Event?
Full Name of Contributor	Employer, Occupati	ion, Labor Organization*		n Number, if PAC
Street Address	Description of Item	or Service	M	D Y Fair Market Value
City	Sta te	Zip Code	Received at	Fundraising Event?
Full Name of Contributor	Employer, Occupati	ion, Labor Organization*	Registration	n Number, if PAC
Street Address	Description of Item	or Service	M	D Y Fair Market Value
City	Sta te	Zip Code	☐ YES	Fundraising Event?
Full Name of Contributor	Employer, Occupati	ion, Labor Organization*	Registration	n Number, if PAC
Street Address	Description of Item	or Service	М	D Y Fair Market Value
City	Sta te	Zip Code	Received at	t Fundraising Event?
Full Name of Contributor	Employer, Occupat	ion, Labor Organization*	Registration	n Number, if PAC
Street Address	Description of Item	or Service	M	D Y Fair Market Value
City	Sta te	Zip Code	Received at	t Fundraising Event?
Full Name of Contributor	Employer, Occupat	ion, Labor Organization*	Registration	n Number, if PAC
Street Address	Description of Item	or Service	М	D Y Fair Market Value
City	Sta te	Zip Code	Received a	t Fundraising Event?
Full Name of Contributor	Employer, Occupat	tion, Labor Organization*	Registration	n Number, if PAC
Street Address	Description of Item	or Service	M	D Y Fair Market Value
City	Sta te	Zip Code	Received a	t Fundraising Event?

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and 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)]

Page Total \$ 1000