

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Serrott for Judge Committee							
Full Name of Contributor David P. Rieser					Registration Number, if PAC		
Street Address 844 S Front Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 0 3	D 1 6	Y 1 0	Amount 150.00	
Full Name of Contributor Cecily L. Ferris					Registration Number, if PAC		
Street Address 187 Vista Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43230	M 0 3	D 1 6	Y 1 0	Amount 50.00	
Full Name of Contributor Zachary Scott					Registration Number, if PAC		
Street Address 7784 Rowles Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43235	M 0 3	D 1 6	Y 1 0	Amount 50.00	
Full Name of Contributor Melissia Fuhrmann					Registration Number, if PAC		
Street Address 1129 Afton Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43221	M 0 3	D 1 6	Y 1 0	Amount 50.00	
Full Name of Contributor Warner M. Thomas, JR					Registration Number, if PAC		
Street Address 140 E. Town St Suite 1100		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 3	D 1 6	Y 1 0	Amount 50.00	
Full Name of Contributor Richard A. Frye					Registration Number, if PAC		
Street Address 1669 Roxbury Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43212	M 0 3	D 1 6	Y 1 0	Amount 100.00	
Full Name of Contributor Mark A. Hummer					Registration Number, if PAC		
Street Address 1795 Edgemont Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Upper Arlington	State O H	Zip Code 43212	M 0 3	D 1 6	Y 1 0	Amount 100.00	
Full Name of Contributor Jonathan R. Fulkerson					Registration Number, if PAC		
Street Address 7750 Eagle Trace Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0 3	D 1 6	Y 1 0	Amount 100.00	

* 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)]

Page Total \$ 650.00