

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Serrott for Judge Committee									
Full Name of Contributor Columbus/Central Ohio Building Trades Council-Education Fund						Registration Number, if PAC			
Street Address 555 E Rich St			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43215		M 0 8	D 2 8	Y 1 0	Amount 250.00
Full Name of Contributor Robert Gray Palmer						Registration Number, if PAC			
Street Address 185 Rustic Pl			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43214		M 0 8	D 2 8	Y 1 0	Amount 250.00
Full Name of Contributor Alan P. Friedman						Registration Number, if PAC			
Street Address 7110 E Livingston Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Reynoldsberg		State O H		Zip Code 43068		M 0 8	D 2 8	Y 1 0	Amount 75.00
Full Name of Contributor Javier Armengau, LPA, Inc						Registration Number, if PAC			
Street Address 857 S High St			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43206		M 0 9	D 0 1	Y 1 0	Amount 150.00
Full Name of Contributor David A Goldstein						Registration Number, if PAC			
Street Address 150 S Roosevelt Ave			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Bexley		State O H		Zip Code 43209		M 0 9	D 0 1	Y 1 0	Amount 200.00
Full Name of Contributor Grab D Shoub						Registration Number, if PAC			
Street Address 7032 Wethersfield Pl			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Worthington		State O H		Zip Code 43085		M 0 9	D 0 1	Y 1 0	Amount 150.00
Full Name of Contributor Allen J Reis						Registration Number, if PAC			
Street Address 3250 Knoll Dr			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Gahanna		State O H		Zip Code 43230		M 0 9	D 0 1	Y 1 0	Amount 100.00
Full Name of Contributor Joel R Cambell						Registration Number, if PAC			
Street Address 575 S 3rd St			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check		
City Columbus		State O H		Zip Code 43215		M 0 9	D 0 7	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 \$ 1,275.00