

Event Date 05 20 10

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## Statement of Contributions Received at a Social or Fundraising Event

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Serrott for Judge Committee</b>							
Full Name of Contributor <b>Jo E. Kaiser</b>				Registration Number, if PAC			
Street Address <b>369 Library Park Court</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>2</b>	Amount <b>50.00</b>
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43215</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Janet A. Grubb</b>				Registration Number, if PAC			
Street Address <b>4062 Georgesville Wrightsville Rd</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>2</b>	Amount <b>50.00</b>
City <b>Grove City</b>		State <b>O   H</b>	Zip Code <b>43123</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Jeffrey A. Grossman</b>				Registration Number, if PAC			
Street Address <b>2696 Fair Ave</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>2</b>	Amount <b>200.00</b>
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43209</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Frank J. Macke</b>				Registration Number, if PAC			
Street Address <b>370 E. Cooke Rd</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>2</b>	Amount <b>200.00</b>
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43214</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Karen Held Phipps</b>				Registration Number, if PAC			
Street Address <b>4333 Reed Rd</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>2</b>	Amount <b>200.00</b>
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43220</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Robert Essex</b>				Registration Number, if PAC			
Street Address <b>15 Burreed Court</b>		Employer/Occupation/Labor Organization*		M <b>0</b>	D <b>5</b>	Y <b>2</b>	Amount <b>75.00</b>
City <b>Pataskla</b>		State <b>O   H</b>	Zip Code <b>43062</b>	Form(Cash,Check,etc) <b>Check</b>			
Full Name of Contributor <b>Cindi Sours-Morehart</b>				Registration Number, if PAC			
Street Address <b>4063 Riverview Drive</b>		Employer/Occupation/Labor Organization*		M <b>6</b>	D <b>5</b>	Y <b>2</b>	Amount <b>100.00</b>
City <b>Columbus</b>		State <b>O   H</b>	Zip Code <b>43202</b>	Form(Cash,Check,etc) <b>Check</b>			

Total contributions this event

Total expenditures this event

Page Total \$ **875.00**

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