

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full SERROTT FOR Judge							
Full Name of Contributor JEFF LEWIS Co. LPA						Registration Number, if PAC	
Street Address 500 S. 4TH ST		Employer/Occupation/Labor Organization* ATTNLY				Form (Cash, ☒ Check, etc.)	
City Col's	State OH	Zip Code 43215	M 0	D 4	Y 25	Amount 100⁰⁰	
Full Name of Contributor I.B.E.W.						Registration Number, if PAC	
Street Address 25 W. 2nd Ave		Employer/Occupation/Labor Organization* ATTNLY				Form (Cash, ☒ Check, etc.) 1000⁰⁰	
City Col's	State OH	Zip Code 43201	M 0	D 5	Y 06	Amount 1000⁰⁰	
Full Name of Contributor RAY MULANSKI						Registration Number, if PAC	
Street Address 107 W. JOHNSTOWN RD		Employer/Occupation/Labor Organization* ATTNLY				Form (Cash, ☒ Check, etc.)	
City GATMANA	State OH	Zip Code 43230	M 0	D 6	Y 08	Amount 150⁰⁰	
Full Name of Contributor CHRIS MINELLO						Registration Number, if PAC	
Street Address 1500 W. THIRD		Employer/Occupation/Labor Organization* ATTNLY				Form (Cash, ☒ Check, etc.)	
City Col's	State OH	Zip Code 43212	M 0	D 6	Y 08	Amount 100⁰⁰	
Full Name of Contributor DAVID WHITTAKER						Registration Number, if PAC	
Street Address 100 S. Third		Employer/Occupation/Labor Organization* ATTNLY				Form (Cash, ☒ Check, etc.)	
City Col's	State OH	Zip Code 43215	M 0	D 6	Y 08	Amount 150⁰⁰	
Full Name of Contributor LARRY LEVINSON						Registration Number, if PAC	
Street Address 175 S. THIRD		Employer/Occupation/Labor Organization* ATTNLY				Form (Cash, ☒ Check, etc.)	
City Col's	State OH	Zip Code 43211	M 0	D 6	Y 08	Amount 75⁰⁰	
Full Name of Contributor GERALD LEESEBERG						Registration Number, if PAC	
Street Address 175 S. THIRD		Employer/Occupation/Labor Organization* ATTNLY				Form (Cash, ☒ Check, etc.)	
City Col's	State OH	Zip Code 43215	M 0	D 6	Y 08	Amount 250⁰⁰	
Full Name of Contributor BARRY WILFORD						Registration Number, if PAC	
Street Address 481 E. Sycamore St		Employer/Occupation/Labor Organization* ATTNLY				Form (Cash, ☒ Check, etc.)	
City Col's	State OH	Zip Code 43206	M 0	D 6	Y 10	Amount 300⁰⁰	

* 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)]