

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Serrott for Judge Committee							
Full Name of Contributor Mark Serrot					Registration Number, if PAC		
Street Address 789 A Northwest Blvd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212	M 0	D 8	Y 0	Amount 100.00	
Full Name of Contributor Coleman For Columbus					Registration Number, if PAC		
Street Address 550 East Walnut		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43251	M 0	D 8	Y 0	Amount 1,000.00	
Full Name of Contributor Vorys Sater Seymour and Pease					Registration Number, if PAC		
Street Address 52 E Gay St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0	D 8	Y 0	Amount 950.00	
Full Name of Contributor Plumbers & Pipefitters L.U. 189					Registration Number, if PAC		
Street Address 1250 Kinnear Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43212	M 0	D 8	Y 0	Amount 250.00	
Full Name of Contributor NC4, LLC					Registration Number, if PAC		
Street Address P.O.BOX 2696		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43086	M 0	D 8	Y 0	Amount 3,000.00	
Full Name of Contributor Katherine Giacomelli Butcher					Registration Number, if PAC		
Street Address 413 Mulberry Way West		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Westerville	State O H	Zip Code 43082	M 0	D 8	Y 0	Amount 100.00	
Full Name of Contributor Shawn Dominy					Registration Number, if PAC		
Street Address 3837 Attucks Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Powell	State O H	Zip Code 43065	M 0	D 8	Y 0	Amount 75.00	
Full Name of Contributor Samuel B. Weiner					Registration Number, if PAC		
Street Address 743 S. Front St.		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 0	D 8	Y 0	Amount 250.00	

* 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 \$ 5,725.00