31-E R.C. 3517.10(B)

Event Date	04 27 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	SSECTION AND ADDRESS OF THE PROPERTY OF THE PR		
Serrott for Judge Committee			toricological and the second s
Full Name of Contributor		Registration Number, if PAC	
Kristen J. Brown			-
Street Address	Employer/Occupation/Labor Organization*		
1489 Oakbourne Drive		0 4 2 7 1 0	100.00
City	State Zip Code	Form(Cash,Check,etc)	
Worthington	O H 43235	Check	
Full Name of Contributor		Registration Number, if PAC	
Fred L. Berkemer			
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount	
1806 Hickory Hill Drive		0 4 2 7 1 0	100.00
City	State Zip Code	Form(Cash,Check,etc)	. 5 0
Columbus	O H 43228	Check	
Full Name of Contributor	a. a. To San back	Registration Number, if PAC	
Bill R. Hedrick		,	
Street Address	Employer/Occupation/Labor Organization*	M D Y Amount	
Street Address 535 West First Ave		0 4 2 7 1 0	100.00
535 West First Ave City	State Zip Code		~00.00
	C 1 FY 4004	Form(Cash,Check,etc)  Check	
Columbus  Full Name of Contributor	O H 43215	Registration Number, if PAC	
Full Name of Contributor		regionation number, it PAC	
Gary Tyack	Firmlesse/Og was 12 7 7	MID	
Street Address	Employer/Occupation/Labor Organization*		100.00
381 Loveman Ave		0 4 2 7 1 0	100.00
City	State Zip Code	Form(Cash,Check,etc)	
Worthington	O H 43085	Check	
Full Name of Contributor		Registration Number, if PAC	
David C. Young			
Street Address	Employer/Occupation/Labor Organization*		
496 S. High Street, Suite 400		0 4 2 7 1 0	100.00
City	State Zip Code	Form(Cash,Check,etc)	
Columbus	O H 43228	Check	
Full Name of Contributor		Registration Number, if PAC	
Roger M. Koeck			
Street Address	Employer/Occupation/Labor Organization*	* M D Y Amount	.,
6257 Emberwood Rd		0 4 2 7 1 0	100.00
City	State Zip Code	Form(Cash,Check,etc)	_ 0.00
Dublin	O H 43017	Check	
Full Name of Contributor	10121 101/	Registration Number, if PAC	
Bernard M. Floetker			
Bernard M. Floetker Street Address	Employer/Occupation/Labor Organization*	* M D Y Amount	
			100.00
1295 S. High Street	State Zip Code	0 4 2 7 1 0 Form(Cash,Check,etc)	TON.OO
Columbus			
Columbus	O H 43206	Check	
Total contributions this event	Total expenditures this event	Page Total \$	MARIE VIV
		Page Total \$	700.00