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Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full									
Serrott For Judge									
Full Name of Contributor			· · · · · · · · · · · · · · · · · · ·	Registra	tion Num	er, if PAG	C		
Douglas W. Warnock				1					
Street Address	Employer/O	ccupat	ion/Labor Organization*				Form (Cash, Che	ck, etc.)	
515 Pollock Rd	1	•					Check		
City	State		Zip Code	М	D	Y	Amount		
Delaware		Н	43015	110	2 6	1 0		100.00	
Full Name of Contributor					tion Numl		c		
John Master									
Street Address	Employer/O	ccupat	ion/Labor Organization*				Form (Cash, Che	ck, etc.)	
3817 Nicova Ct							Check		
City	State		Zip Code	М	D	Y	Amount		
Lewis Center	101	H	43035	1110	2 6	1 0		50.00	
Full Name of Contributor	<u> </u>		<u> </u>	Registra	tion Numb				
The McCandlish Group				1					
Street Address	Employer/O	ccupat	ion/Labor Organization*				Form (Cash, Che	ck, etc.)	
5260 Godown Rd							Check		
City	State		Zip Code	М	D	Y	Amount		
Columbus		H	43235	1 0	2 6	1 0		200.00	
Full Name of Contributor			<u>.</u> ,	Registra	tion Numb	er, if PAG	2		
R. Douglas Wrightsel			. <u></u>				_		
Street Address	Employer/O	ccupat	ion/Labor Organization*				Form (Cash, Che	ck, etc.)	
1851 Jewett Rd							Check		
City	State		Zip Code	M	D		Amount		
<u>Powell</u>		H	43065	1 0	2 8	1 0		100.00	
Full Name of Contributor				Registra	tion Numb	er, if PAG	C	·	
Keith M. Karr									
Street Address	Employer/O	ccupat	ion/Labor Organization*				Form (Cash, Che	ck, etc.)	
2 Miranova Place, Suite 410					,		Check		
City	State	1	Zip Code	M	D	Y	Amount	200.00	
Columbus		H	43215	1 0		1 0		200.00	
	Full Name of Contributor Registration Number, if PAC								
Edwin L. Malek Street Address	- In 1 - G						- 10 h m		
	Employer/O	ccupat	ion/Labor Organization*				Form (Cash, Che	ck, etc.)	
1227 S. High Street	State		7:- 0-1-	1 14	1 5	17	Check		
Columbus	State	н	Zip Code 43206	M	D	Y	Amount	250.00	
Full Name of Contributor	[0]		43200	_	2 8	1 0	<u> </u>	250.00	
PorterWright				Registra	шоп иши	MCI, II FASS	~		
Street Address	Employer/Or	counat	ion/Labor Organization*				Form (Cash, Che	ck ato)	
41 S. High Street	ishipidyel/O	cupai	ion Education				Check	ck, etc.)	
City	State	1	Zip Code	Тм	D	Y	Amount		
Columbus	l l	н	43215	110	I	1 0	, anoun	500.00	
Full Name of Contributor	101		10210		tion Numb			300.00	
Solove and McCormick									
Street Address	Employer/Oc	cupat	ion/Labor Organization*				Form (Cash, Che	ck, etc.)	
79 Thurman Ave		•	-				Check	,	
City	State		Zip Code	М	D	Y	Amount		
Columbus		нΙ	43206	110	1	1 0		500.00	
equired for contributions from individuals over \$100 to statewish and		ر داد داد	20200		14 U	I U		200.00	

Page Total \$ 1,900.00

^{*} 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)]