

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

|   |                     |   |                 |                 |  |                         |  |
|---|---------------------|---|-----------------|-----------------|--|-------------------------|--|
| Name of Committee in Full<br><b>Serrott for Judge Committee</b> |                     |   |                 |                 |  |                         |  |
| Full Name of Contributor<br><b>Dennis G. Day</b>                |                     |   |                 |                 | Registration Number, if PAC              |                         |  |
| Street Address<br><b>330 S High St</b>                          |                     | Employer/Occupation/Labor Organization* |                 |                 | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>   | State<br><b>O H</b> | Zip Code<br><b>43215</b>                | M<br><b>0 7</b> | D<br><b>0 6</b> | Y<br><b>1 0</b>                          | Amount<br><b>75.00</b>  |  |
| Full Name of Contributor<br><b>Michelle L. Koffel</b>           |                     |   |                 |                 | Registration Number, if PAC              |                         |  |
| Street Address<br><b>2050 Tremont Rd</b>                        |                     | Employer/Occupation/Labor Organization* |                 |                 | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Upper Arlington</b>                                  | State<br><b>O H</b> | Zip Code<br><b>43221</b>                | M<br><b>0 7</b> | D<br><b>0 6</b> | Y<br><b>1 0</b>                          | Amount<br><b>500.00</b> |  |
| Full Name of Contributor<br><b>Mark A. Hummer</b>               |                     |   |                 |                 | Registration Number, if PAC              |                         |  |
| Street Address<br><b>1795 Edgemont Rd</b>                       |                     | Employer/Occupation/Labor Organization* |                 |                 | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>   | State<br><b>O H</b> | Zip Code<br><b>43212</b>                | M<br><b>0 7</b> | D<br><b>0 6</b> | Y<br><b>1 0</b>                          | Amount<br><b>150.00</b> |  |
| Full Name of Contributor<br><b>Jim Crates</b>                   |                     |   |                 |                 | Registration Number, if PAC              |                         |  |
| Street Address<br><b>339 E Maple St</b>                         |                     | Employer/Occupation/Labor Organization* |                 |                 | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Granville</b>  | State<br><b>O H</b> | Zip Code<br><b>43023</b>                | M<br><b>0 7</b> | D<br><b>0 6</b> | Y<br><b>1 0</b>                          | Amount<br><b>75.00</b>  |  |
| Full Name of Contributor<br><b>P Dennis Pusateri</b>            |                     |   |                 |                 | Registration Number, if PAC              |                         |  |
| Street Address<br><b>492 City Park Ave</b>                      |                     | Employer/Occupation/Labor Organization* |                 |                 | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>   | State<br><b>O H</b> | Zip Code<br><b>43215</b>                | M<br><b>0 7</b> | D<br><b>0 6</b> | Y<br><b>1 0</b>                          | Amount<br><b>75.00</b>  |  |
| Full Name of Contributor<br><b>Teresa Daughtery</b>             |                     |   |                 |                 | Registration Number, if PAC              |                         |  |
| Street Address<br><b>5053 Grassland Dr</b>                      |                     | Employer/Occupation/Labor Organization* |                 |                 | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Dublin</b>   | State<br><b>O H</b> | Zip Code<br><b>43016</b>                | M<br><b>0 7</b> | D<br><b>0 6</b> | Y<br><b>1 0</b>                          | Amount<br><b>75.00</b>  |  |
| Full Name of Contributor<br><b>Eric J Burden</b>                |                     |   |                 |                 | Registration Number, if PAC              |                         |  |
| Street Address<br><b>7091 Oakstream Ct</b>                      |                     | Employer/Occupation/Labor Organization* |                 |                 | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>Columbus</b>   | State<br><b>O H</b> | Zip Code<br><b>43235</b>                | M<br><b>0 7</b> | D<br><b>0 6</b> | Y<br><b>1 0</b>                          | Amount<br><b>150.00</b> |  |
| Full Name of Contributor<br><b>Richard Ketcham</b>              |                     |   |                 |                 | Registration Number, if PAC              |                         |  |
| Street Address<br><b>755 S. HIGH STREET</b>                     |                     | Employer/Occupation/Labor Organization* |                 |                 | Form (Cash, Check, etc.)<br><b>Check</b> |                         |  |
| City<br><b>COLUMBUS</b>   | State<br><b>O H</b> | Zip Code<br><b>43206</b>                | M<br><b>0 7</b> | D<br><b>0 6</b> | Y<br><b>1 0</b>                          | Amount<br><b>150.00</b> |  |

\* 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 \$ 1,250.00