

# Statement of Other Income

Prescribed by Secretary of State 2/01

Name of Committee in Full <b>Serrott for Judge</b>													
Full Name <b>Mark Serrott</b>					Registration Number, if PAC								
Address <b>739 (A) Northwest Blvd</b>			Type* <b>I N</b>		M <b>1</b>			D <b>0</b>		Y <b>1</b>		Amount <b>9,000.00</b>	
City <b>Columbus</b>			State <b>O H</b>		Zip Code <b>43212</b>			Form(Cash,Check,etc) <b>Check</b>					
Full Name					Registration Number, if PAC								
Address			Type*		M			D		Y		Amount	
City			State		Zip Code			Form(Cash,Check,etc)					
Full Name					Registration Number, if PAC								
Address			Type*		M			D		Y		Amount	
City			State		Zip Code			Form(Cash,Check,etc)					
Full Name					Registration Number, if PAC								
Address			Type*		M			D		Y		Amount	
City			State		Zip Code			Form(Cash,Check,etc)					
Full Name					Registration Number, if PAC								
Address			Type*		M			D		Y		Amount	
City			State		Zip Code			Form(Cash,Check,etc)					
Full Name					Registration Number, if PAC								
Address			Type*		M			D		Y		Amount	
City			State		Zip Code			Form(Cash,Check,etc)					
Full Name					Registration Number, if PAC								
Address			Type*		M			D		Y		Amount	
City			State		Zip Code			Form(Cash,Check,etc)					
Full Name					Registration Number, if PAC								
Address			Type*		M			D		Y		Amount	
City			State		Zip Code			Form(Cash,Check,etc)					
Full Name					Registration Number, if PAC								
Address			Type*		M			D		Y		Amount	
City			State		Zip Code			Form(Cash,Check,etc)					

\* Place the two letter code in the Type block (one letter per square) which indicates the nature of the Other income Received; RE for a refund, uncashed check or the committee's own insufficient funds check received, place the letters IN for any investment or interest income earned by the committee, SA for the sale of committee assets, or LN for payments received on a loan made.

Page Total \$ 9,000.00