

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Serrott for Judge Committee							
Full Name of Contributor Knisely, Kathleen					Registration Number, if PAC		
Street Address 1418 Northam Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43221	M 0 6	D 1 5	Y 1 0	Amount 200.00	
Full Name of Contributor Vorys, Sater, Seymour, and Pease, LLP					Registration Number, if PAC OH109		
Street Address 52 E. Gay St - PO BOX 1008		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43215	M 0 6	D 1 4	Y 1 0	Amount 1,000.00	
Full Name of Contributor Don Kelch					Registration Number, if PAC		
Street Address 3926 Dierker Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43220	M 0 6	D 1 6	Y 1 0	Amount 250.00	
Full Name of Contributor Bernie Floetker					Registration Number, if PAC		
Street Address 1203 S High St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 432515	M 0 6	D 1 6	Y 1 0	Amount 50.00	
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 7	D 0 6	Y 1 0	Amount 150.00	
Full Name of Contributor Michael Allen					Registration Number, if PAC		
Street Address 708 N Starr Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Pickerington	State O H	Zip Code 43147	M 0 7	D 0 6	Y 1 0	Amount 75.00	
Full Name of Contributor Richard Topper					Registration Number, if PAC		
Street Address 5132 Olentangy River Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43235	M 0 7	D 0 6	Y 1 0	Amount 100.00	
Full Name of Contributor Sean H. Maxfield					Registration Number, if PAC		
Street Address 825 S Front St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check		
City Columbus	State O H	Zip Code 43206	M 0 7	D 0 6	Y 1 0	Amount 75.00	

* 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 \$ **1,900.00**