

Statement of Expenditures

Prescribed by Secretary of State 2/01

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Name of Committee in Full Serroni FOR Judge											
To Whom Paid ERIC SERRONI							M	D	Y	Amount	
Address 5439 CRAWFORD							05/16/16				2504
City WIS							State OH		Zip Code 43229		Check Number
To Whom Paid MARK SERRONI							M	D	Y	Amount	
Address 789 (A) NW Blvd							05/16/16				208⁸⁸
City WIS							State OH		Zip Code 43212		Check Number 1264
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City							State		Zip Code		Check Number
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City							State		Zip Code		Check Number
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City							State		Zip Code		Check Number
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City							State		Zip Code		Check Number
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City							State		Zip Code		Check Number
To Whom Paid							M	D	Y	Amount	
Address							Purpose				
City							State		Zip Code		Check Number