

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Columbus Community Bill of Rights PAC						
Full Name of Contributor Will Perkins				Registration Number, if PAC		
Street Address 3535 Maize Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43224	M 0	D 7	Y 1 0 1 9	Amount \$20.00
Full Name of Contributor T-shirt purchases (bundled) from ComFest				Registration Number, if PAC		
Street Address PO Box 7167		Employer/Occupation/Labor Organization* Bundled donations < \$25.00 each			Form (Cash, Check, etc.) cash	
City Columbus	State OH	Zip Code 43205	M 0	D 7	Y 1 0 1 9	Amount \$150.00
Full Name of Contributor ComFest donation jar				Registration Number, if PAC		
Street Address PO Box 7167		Employer/Occupation/Labor Organization* Donation jar (bundled donations < \$25.00 each)			Form (Cash, Check, etc.) cash	
City Columbus	State OH	Zip Code 43205	M 0	D 7	Y 1 0 1 9	Amount \$8.00
Full Name of Contributor T-shirt purchase				Registration Number, if PAC		
Street Address 88 W. Blake Avenue		Employer/Occupation/Labor Organization* anonymous T-shirt purchaser			Form (Cash, Check, etc.) cash	
City Columbus	State OH	Zip Code 43202	M 0	D 7	Y 2 5 1 9	Amount \$20.00
Full Name of Contributor Anonymous donation				Registration Number, if PAC		
Street Address 3600 Indianola Avenue		Employer/Occupation/Labor Organization* anonymous donation			Form (Cash, Check, etc.) cash	
City Columbus	State OH	Zip Code 43214	M 0	D 8	Y 2 7 1 9	Amount \$20.00
Full Name of Contributor T-shirt purchases				Registration Number, if PAC		
Street Address 156 N. Roosevelt Avenue		Employer/Occupation/Labor Organization* bundled purchases < \$25.00 each			Form (Cash, Check, etc.) cash	
City Bexley	State OH	Zip Code 43209	M 0	D 8	Y 1 9 1 9	Amount \$100.00
Full Name of Contributor Toledoans for Safe Water				Registration Number, if PAC		
Street Address 4640 288th Street		Employer/Occupation/Labor Organization* small environmental organization			Form (Cash, Check, etc.) check	
City Toledo	State OH	Zip Code 43611	M 0	D 8	Y 2 7 1 9	Amount \$55.00
Full Name of Contributor Sandy Bolzenius				Registration Number, if PAC		
Street Address 88 W. Blake Avenue		Employer/Occupation/Labor Organization* teacher			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43202	M 0	D 9	Y 0 3 1 9	Amount \$100.00

* 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 also appear. [R.C. 3517.10(B)(4)]

Page Total **\$473.00**