Page 🖇

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full				
Committee to Elect Andrew Peeples for Judge				
Full Name of Contributor			Registration Number, if PAC	
Jane APeeples			registration Number, if PAC	
Street Address	Employer/Occup	pation/Labor Organization*		Form (Cash, Check, etc.)
6401 Stoll Lane				check
City	State	Zip Code	M D Y	Amount
Cincinnati	1014	45236	018 210013	
Full Name of Contributor			Registration Number, if I	
Columbus/Central Ohio Bldg + Constru	ction Trac	les Council PAC	LA1214	
	Етрюует/Оссир	pation/Labor Organization*		Form (Cash, Check, etc.)
555 E, Rich St. #2/7				check
	State	Zip Code	M D Y	Amount
Columbus Full Name of Contributor	OH	43215	0818018	500,00
	Registration Nun			AC
Angela Radney Street Address	In it is			
777/2 Chandra Can	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)	
7776 Cheriton Cir	Cart	2: 0 :		check
Reynoldsburg	State	Zip Code 43068	M D Y	Amount
Full Name of Contributor	TO IN	73068	018 110 012	-, -,
Linda L. Childs - Jeter			Registration Number, if P	AC
Street Address				
1033 Adams St				Form (Cash, Check, etc.)
City	State	Zip Code	IM IN IV	Check
Cincinnati	0 14	45 215	0 8 1 0 0 5	Amount
Full Name of Contributor		75 2.5	Registration Number, if P	
Shunflica Smith Street Address Franchise / Occupation Advanced Prophysical Advanced Prophysical Advanced Prophysical Prophys				
	Employer/Occupa	ition/Labor Organization*		Form (Cash, Check, etc.)
4066 N8th Street	-			check
City	State	Zip Code	M D Y	Amount
Milwaukee	WI	53209	018 114 015	2
Full Name of Contributor			Registration Number, if PA	
Preston Stearns Street Address				
	Employer/Occupa	tion/Labor Organization*		Form (Cash, Check, etc.)
1020 Matterhorn Dr				Check
Reynolds burg	State	Zip Code	M D Y	Amount
Full Name of Contributor	OH	43068	018016015	50.00
Marchelle Moore		·	Registration Number, if PA	VC .
Street Address	F. 1 60			
7918 Slate Ridge Boulevard	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
City Double Ridge Double vard	Sur	7		cash
Reynoldsburg	State O H	Zip Code 43068	M D Y	Amount
Full Name of Contributor	- 1	10000	0 8 2 8 0 5	20.00
Registration Number of DAC				C
Erica Gartner Street Address	Employer/Occurs	ion/Labor Organization*	L	
2086 Ridgeview Rd D	фиоден Оссиран	CONTRACTOR OF SAME AND ADDRESS OF SAME AND ADD		Form (Cash, Check, etc.)
City	State	Zip Code	TV IS T	cash
Columbus	OH	43221	082805	Amount
quired for contributions from individuals over \$100 to statewide and gene		10 001	1001000	10.00

required to 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 \$ 830