

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Committee to Re-Elect Judge Peeples</b>									
Full Name of Contributor <b>Larry Thomas</b>						Registration Number, if PAC			
Street Address <b>1058 Mt. Vernon Ave.</b>			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43203</b>		M <b>0</b>	D <b>3</b>	Y <b>2</b>	Y <b>9</b>	Amount <b>\$200.00</b>
Full Name of Contributor <b>Carole Depaola</b>						Registration Number, if PAC			
Street Address <b>4944 Buck Thorn Lane</b>			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43220</b>		M <b>0</b>	D <b>3</b>	Y <b>2</b>	Y <b>8</b>	Amount <b>\$25.00</b>
Full Name of Contributor <b>Reminger &amp; Reminger Co., LPA Ohio Political Action Committee</b>						Registration Number, if PAC <b>CP 495</b>			
Street Address <b>1400 Midland Bldg., 101 Prospect Ave.</b>			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Cleveland</b>		State <b>OH</b>	Zip Code <b>44115</b>		M <b>0</b>	D <b>3</b>	Y <b>2</b>	Y <b>2</b>	Amount <b>\$200.00</b>
Full Name of Contributor <b>Robert Mendoza</b>						Registration Number, if PAC			
Street Address <b>51803 Tall Pines Dr.</b>			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Elkhart</b>		State <b>IN</b>	Zip Code <b>46514</b>		M <b>0</b>	D <b>4</b>	Y <b>0</b>	Y <b>7</b>	Amount <b>\$20.00</b>
Full Name of Contributor <b>Ladana Emerson</b>						Registration Number, if PAC			
Street Address <b>1705 Highway 5 North</b>			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Benton</b>		State <b>AR</b>	Zip Code <b>72109</b>		M <b>0</b>	D <b>4</b>	Y <b>0</b>	Y <b>3</b>	Amount <b>\$25.00</b>
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)		
City		State <b>OH</b>	Zip Code		M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)		
City		State <b>OH</b>	Zip Code		M	D	Y	Y	Amount
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization *				Form (Cash, Check, etc.)		
City		State <b>OH</b>	Zip Code		M	D	Y	Y	Amount

\* 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 **\$470.00**