

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full									
Friends to Elect Perkins									
Full Name of Contributor						Registration Number, if PAC			
DOROTHY WILSON									
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
0355 GARDENDALE DR		Retired Educator				USOI			
City		State		Zip Code		M		D Y	
Columbus		OH		43219		09		28 07	
Amount						\$20.00			
Full Name of Contributor						Registration Number, if PAC			
BOLITA WARD									
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
7763 CROMWELL ENCL		UNKNOWN				3917			
City		State		Zip Code		M		D Y	
NEW ALBANY		OH		43054		09		23 07	
Amount						\$50.00			
Full Name of Contributor						Registration Number, if PAC			
HENRY EVANS									
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
6044 FEDER RD		UNKNOWN				4369			
City		State		Zip Code		M		D Y	
GALLOWAY, OH		OH		43119		09		23 07	
Amount						\$200.00			
Full Name of Contributor						Registration Number, if PAC			
EDWIN HOGAN									
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
2727 MITZI DR		UNKNOWN				1416			
City		State		Zip Code		M		D Y	
Columbus		OH		43209		09		23 07	
Amount						\$100.00			
Full Name of Contributor						Registration Number, if PAC			
CHARLES MONTGOMERY									
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
810 S. ASHBURTON RD		UNKNOWN				1354			
City		State		Zip Code		M		D Y	
Columbus		OH		43227		09		23 07	
Amount						\$100.00			
Full Name of Contributor						Registration Number, if PAC			
KEENA YAJNIK									
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
3795 SCHIETRINGER RD		Unknown				5809			
City		State		Zip Code		M		D Y	
Hilliard		OH		43206		09		22 07	
Amount						50.00			
Full Name of Contributor						Registration Number, if PAC			
RONALD WILLIAMS									
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
038 CERRYSTONE DRIVE		unknown				14545			
City		State		Zip Code		M		D Y	
Columbus		OH		43230		09		23 07	
Amount						\$25.00			
Full Name of Contributor						Registration Number, if PAC			
THELMA PRICE									
Street Address		Employer/Occupation/Labor Organization				Form (Cash, Check, etc.)			
2656 MITZI DR		UNKNOWN				8844			
City		State		Zip Code		M		D Y	
Columbus		OH		43209		09		24 07	
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 \$0.00

645.00