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RC	3517	10

Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Committee For Building A Stronger	Perry Township	· · -		-
Full Name of Contributor Chet Chaney	,	, , , , , , , , , , , , , , , , , , ,	Registration Number, i	ГРАС
Street Address	Employer/Occi	pation/Labor Organization		Form (Cash, Check, etc.)
7959 Fairway Drive	' -	wnship Trustee		Check
City Columbus	State OH	Zip Code 43235	0 3 1 4 1	Amount \$ \$500.00
Full Name of Contributor	·		Registration Number, i	f PAC
Robert L. Oppenheimer				
Street Address	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)
811 Wakeman Court	Perry Township Police		·	Check
City Westerville	OH.	Zip Code 43081	0 3 1 8 1	Amount \$500.00
Full Name of Contributor Richard A. Oxender (Oxender and A	ssociates)		Registration Number, if PAC	
Street Address c/o 140 E. Town Street, Ste. 142		Employer/Occupation/Labor Organization Consultants		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43215	0 3 2 1 1	Amount 4 \$500.00
Full Name of Contributor Nicholas Z. Alexander	<u>'</u>	·	Registration Number, it	(PAC
Street Address	· Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)
7970 Greenside Lane		At-Law/Retired		Check
City Columbus	State OH	Zip Code 43235	0 3 2 1 1	Amount \$100.00
Full Name of Contributor Andrew J. English			Registration Number, it	rpac
Street Address		pation/Labor Organization	<u> </u>	Form (Cash, Check, etc.)
1589 Newcomer Road	Perry Tow	nship Trustee		Check
City Columbus	State OH	Zip Code 43235	0 3 2 2 1	Amount 4 \$500.00
Full Name of Contributor Michelle M. Elliott	<u> </u>		Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)
2702 McVey Boulevard West	Perry Tow	nship Fiscal Officer		Check
City Columbus	State OH	Zip Code 43235	0 3 2 4 1 4	Amount \$500.00
Full Name of Contributor Nicholas Z. Alexander	, · · · · ·		Registration Number, if	TPAC
Street Address 7970 Greenside Lane	1	ipation/Labor Organization* At-Law/Retired		Form (Cash, Check, etc.) Check
Cin Columbus	State OH	Zip Code 43235	0 3 2 6 1 4	Amount \$150.00
Full Name of Contributor Frank Harmon	T	-	Registration Number, if	FPAC .
Street Address 4267Clark Shaw Rd.	' '	pation/Labor Organization*		Form (Cash, Check, etc.) Cash
City	State	Zip Code	ME D Y	Amount
Powell	OH	43065	0 3 2 8 1	4 \$500.00

Page Total \$3,250.00

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)]