

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends to Elect PERKINS				
Full Name of Contributor ROSANNE Carmichael			Registration Number, if PAC	
Street Address 11620 E. Broad Street #402	Employer/Occupation/Labor Organization* Retired		M 09	D 29
City Columbus	State OH	Zip Code 43203	Y 07	Amount \$25.00
Form (Cash, Check, etc.) 7146				
Full Name of Contributor Glenn A. Watson			Registration Number, if PAC	
Street Address 2508 Schaaf Dr.	Employer/Occupation/Labor Organization* Retired		M 09	D 29
City Columbus, Ohio	State OH	Zip Code 43209	Y 07	Amount \$25.00
Form (Cash, Check, etc.) 8087				
Full Name of Contributor Glenn A. Watson			Registration Number, if PAC	
Street Address 2508 Schaaf Dr	Employer/Occupation/Labor Organization* Retired		M 09	D 29
City Columbus	State OH	Zip Code 43209	Y 07	Amount \$25.00
Form (Cash, Check, etc.) 3631				
Full Name of Contributor Tiffany Pannell			Registration Number, if PAC	
Street Address 1449 Cottingham Ct E.	Employer/Occupation/Labor Organization* EVENT PLANNER		M 09	D 29
City Columbus	State OH	Zip Code 43209	Y 07	Amount \$25.00
Form (Cash, Check, etc.) 1941				
Full Name of Contributor Gayzelle B. Nash			Registration Number, if PAC	
Street Address 6670 Axtel Dr.	Employer/Occupation/Labor Organization* MANAGER		M 09	D 29
City Canal Winchester	State OH	Zip Code 43110	Y 07	Amount \$25.00
Form (Cash, Check, etc.) 6457				
Full Name of Contributor Edith O. Turner			Registration Number, if PAC	
Street Address 2335 GARDENDALE DR.	Employer/Occupation/Labor Organization* Retired		M 09	D 29
City Columbus	State OH	Zip Code 43219	Y 07	Amount \$25.00
Form (Cash, Check, etc.) 7821				
Full Name of Contributor Tom Bell Jr.			Registration Number, if PAC	
Street Address 3185 CANNOCK LN	Employer/Occupation/Labor Organization* Retired		M 09	D 29
City Columbus	State OH	Zip Code 43219	Y 07	Amount \$25.00
Form (Cash, Check, etc.) 1538				

* 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)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

\$0.00

Total expenditures this event.

\$0.00

Page Total \$

\$175.00

~~\$0.00~~