

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

Prescribed by Secretary of State 3/05

Event Date	03/02/2015
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Name of Committee in Full Friends of Mary Jo Hudson				
Full Name of Contributor OAPSE AFSCME Turnaround Ohio PAC LA 1269			Registration Number, if PAC	
Street Address 6805 Oak Creek Dr	Employer/Occupation/Labor Organization*		M 03	D 02
			Y 15	Amount \$500.00
City Columbus	State OH	Zip Code 43229-1501	Form (Cash, Check, etc.) Check	
Full Name of Contributor Kimber Perfect			Registration Number, if PAC	
Street Address 251 W 3rd Ave	Employer/Occupation/Labor Organization*		M 03	D 02
			Y 15	Amount \$100.00
City Columbus	State OH	Zip Code 43201-3414	Form (Cash, Check, etc.) Check	
Full Name of Contributor Francis Pompey			Registration Number, if PAC	
Street Address 4809 Saint Andrews Dr	Employer/Occupation/Labor Organization*		M 03	D 02
			Y 15	Amount \$100.00
City Grove City	State OH	Zip Code 43123-8198	Form (Cash, Check, etc.) Credit Card	
Full Name of Contributor Julie Presas			Registration Number, if PAC	
Street Address 112 Highland Ter	Employer/Occupation/Labor Organization* OCLC Counsel		M 03	D 02
			Y 15	Amount \$250.00
City Columbus	State OH	Zip Code 43085-2627	Form (Cash, Check, etc.) Check	
Full Name of Contributor Letha Pugh			Registration Number, if PAC	
Street Address 651 Wiltshire Rd	Employer/Occupation/Labor Organization* Co-Owner Bake me Happy		M 03	D 02
			Y 15	Amount \$500.00
City Columbus	State OH	Zip Code 43204-2431	Form (Cash, Check, etc.) Credit Card	
Full Name of Contributor Sandra Rich			Registration Number, if PAC	
Street Address 978 Village Bluff Dr	Employer/Occupation/Labor Organization*		M 03	D 02
			Y 15	Amount \$100.00
City Columbus	State OH	Zip Code 43235-5163	Form (Cash, Check, etc.) Check	
Full Name of Contributor Elizabeth K Robbins			Registration Number, if PAC	
Street Address 657 Wiltshire Rd	Employer/Occupation/Labor Organization*		M 03	D 02
			Y 15	Amount \$100.00
City Columbus	State OH	Zip Code 43204-2431	Form (Cash, Check, etc.) Check	
Full Name of Contributor Peter Ross			Registration Number, if PAC	
Street Address 300 W Spring St Unit 1302	Employer/Occupation/Labor Organization*		M 03	D 02
			Y 15	Amount \$50.00
City Columbus	State OH	Zip Code 43215-7657	Form (Cash, Check, etc.) Check	