

Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full The Committee For Perry Township							
Full Name of Contributor Mark A. Rice					Registration Number, if PAC		
Street Address 5755 Middletown Ln.		Employer/Occupation/Labor Organization* Perry Township, Police Officer			Form (Cash, Check, etc.) Cash		
City New Albany,	State O H	Zip Code 43054	M 0	D 2	Y 11	Amount 50.00	
Full Name of Contributor Shawn P. Bean					Registration Number, if PAC		
Street Address 6489 Old Ironside Ln.		Employer/Occupation/Labor Organization* Perry Township, Police Officer			Form (Cash, Check, etc.) Cash		
City Delaware,	State O H	Zip Code 43015	M 0	D 1	Y 15	Amount 30.00	
Full Name of Contributor Christopher R. Ruh					Registration Number, if PAC		
Street Address 18240 Whitestone Rd.		Employer/Occupation/Labor Organization* Perry Township, Police Officer			Form (Cash, Check, etc.) Cash		
City Marysville,	State O H	Zip Code 43040	M 0	D 1	Y 15	Amount 20.00	
Full Name of Contributor John R. Thomas					Registration Number, if PAC		
Street Address 781 Ferguson Avenue		Employer/Occupation/Labor Organization* Perry Township, Police Officer			Form (Cash, Check, etc.) Check		
City Delaware,	State O H	Zip Code 43015	M 0	D 1	Y 15	Amount 150.00	
Full Name of Contributor Edward W. Kontul					Registration Number, if PAC		
Street Address 525 Township Rd. 208		Employer/Occupation/Labor Organization* Perry Township, Sergeant			Form (Cash, Check, etc.) Cash		
City Marengo,	State O H	Zip Code 43334	M 0	D 1	Y 15	Amount 52.00	
Full Name of Contributor Michael J. Conkle					Registration Number, if PAC		
Street Address 7733 Lerner Dr.		Employer/Occupation/Labor Organization* Perry Township, Police Officer			Form (Cash, Check, etc.) Cash		
City Blacklick,	State O H	Zip Code 43004	M 	D 	Y 	Amount 20.00	
Full Name of Contributor Emmanuel A. Munoz					Registration Number, if PAC		
Street Address 49 Trail Edge Circle		Employer/Occupation/Labor Organization* Perry Township, Police Officer			Form (Cash, Check, etc.) Cash		
City Powell,	State O H	Zip Code 43065	M 0	D 1	Y 15	Amount 35.00	
Full Name of Contributor Frederick J. Howard					Registration Number, if PAC		
Street Address 7917 Leaview Dr.		Employer/Occupation/Labor Organization* Perry Township, Sergeant			Form (Cash, Check, etc.) Check		
City Columbus,	State O H	Zip Code 43235	M 0	D 1	Y 15	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 appear. [R.C. 3517.10(B)(4)]