

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full									
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M	D	Y	Amount			
Friends to Elect Perkins									
Gary Estes Perkins									
25001 Copa Del Oro Dr #203				CIO			Check 2084		
Hayward	CA	94545-2571	10	15	07	250.00			
William S. Alverson									
2905 Pamela Dr				Security Director			Check 4772		
Columbus	OH	43207	10	02	07	100.00			
Janellu Simmons									
2686 Bloom Dr				Unknown			Check 7576		
Columbus	OH	43219	10	06	07	25.00			
Joyce Smith									
1756 N. Star Dr				Church Administrator			Check 815		
Columbus	OH	43212	10	01	07	50.00			
Friends of Heard									
2603 Burnaby Dr				Unknown			Check 3246		
Columbus	OH	43209	10	06	07	50.00			
Laurel Betty									
268 E. Gates St				Attorney			Check 1008		
Columbus	OH	43206	10	05	07	50.00			
Gayle King									
625 Crossing Creek S				Human Resource Executive			Check 1792		
Gahanna	OH	43230	09	29	07	50.00			

* 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

\$525 ✓