

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>COMMITTEE TO ELECT ANDREA PEEPLES FOR JUDGE</b>							
Full Name of Contributor <b>SHERMAN L LYNEM</b>					Registration Number, if PAC		
Street Address <b>6703 PLAINFIELD RD</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>CINCINNATI</b>	State <b>O   H</b>	Zip Code <b>45236</b>	M <b>0   4</b>	D <b>1   5</b>	Y <b>0   5</b>	Amount <b>25.00</b>	
Full Name of Contributor <b>RUBY GRAHAM EMERSON</b>					Registration Number, if PAC		
Street Address <b>7118 AUTUMN FORREST DR</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>MEMPHIS</b>	State <b>T   N</b>	Zip Code <b>38125</b>	M <b>0   4</b>	D <b>1   5</b>	Y <b>0   5</b>	Amount <b>100.00</b>	
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	
Full Name of Contributor <b>JACQUELINE GRAHAM</b>					Registration Number, if PAC		
Street Address <b>709 S RAILROAD</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>MCGEE</b>	State <b>A   R</b>	Zip Code <b>71654</b>	M <b>0   4</b>	D <b>1   5</b>	Y <b>0   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>MILDRED F. CROSS</b>					Registration Number, if PAC		
Street Address <b>1503 NORTH HICKORY</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>PINE BLUFF</b>	State <b>A   R</b>	Zip Code <b>71601</b>	M <b>0   4</b>	D <b>1   5</b>	Y <b>0   5</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>SMITH &amp; HALE</b>					Registration Number, if PAC		
Street Address <b>37 WEST BROAD STREET</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M <b>0   4</b>	D <b>1   5</b>	Y <b>0   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>FELIX GRAHAM</b>					Registration Number, if PAC		
Street Address <b>1241 W 56TH STREET</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>MERRILVILLE</b>	State <b>I   N</b>	Zip Code <b>46410</b>	M <b>0   4</b>	D <b>2   4</b>	Y <b>0   5</b>	Amount <b>50.00</b>	
Full Name of Contributor <b>JAMEHL DEMONS SHEGOG</b>					Registration Number, if PAC		
Street Address <b>905 BILOXI AVE</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>KERNERSVILLE</b>	State <b>N   C</b>	Zip Code <b>27284</b>	M <b>0   4</b>	D <b>2   4</b>	Y <b>0   5</b>	Amount <b>100.00</b>	

\* 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)]

Page Total \$ 525.00