

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Fred Perkins, Jr Republican Ward Council Seat Committee</u>		Registration Number, if PAC	
Full Name of Contributor <u>Michael Benoit</u>		M D Y Amount <u>06 17 10 100.00</u>	
Street Address <u>1608 Lake Hill Drive</u>	Employer/Occupation/Labor Organization*	Form (Cash, Check, etc.) <u>5947</u>	
City <u>Pineville</u>	State <u>TX</u> Zip Code <u>75023</u>		
Full Name of Contributor <u>Delta Consultants</u>		Registration Number, if PAC	
Street Address <u>1015 Kenway Ct.</u>		M D Y Amount <u>05 13 10 100.00</u>	
City <u>Columbus</u>	State <u>OH</u> Zip Code <u>43200</u>	Form (Cash, Check, etc.) <u>3249</u>	
Full Name of Contributor <u>Perry Results Group</u>		Registration Number, if PAC	
Street Address <u>3738 Pine Bark Road</u>		M D Y Amount <u>09 10 10 100.00</u>	
City <u>Powell</u>	State <u>OH</u> Zip Code <u>43065</u>	Form (Cash, Check, etc.) <u>1284</u>	
Full Name of Contributor		Registration Number, if PAC	
Street Address		M D Y Amount	
City	State Zip Code	Form (Cash, Check, etc.)	
Full Name of Contributor		Registration Number, if PAC	
Street Address		M D Y Amount	
City	State Zip Code	Form (Cash, Check, etc.)	
Full Name of Contributor		Registration Number, if PAC	
Street Address		M D Y Amount	
City	State Zip Code	Form (Cash, Check, etc.)	
Full Name of Contributor		Registration Number, if PAC	
Street Address		M D Y Amount	
City	State Zip Code	Form (Cash, Check, etc.)	

\* 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

4467 00

Total expenditures this event.

3057 01

Page Total \$ 4462.00