

FILED

# Ohio Campaign Finance Report

09 DEC 11 AM 10:39

Prescribed by Secretary of State 3/05

FRANKLIN COUNTY

Full Name of Committee <i>Friends to Elect Perkins</i>						Registration Number, if PAC/ELECTION			
Full Name of Candidate <i>Carol Perkins</i>									
Street Address <i>1580 Melrose Ave</i>					Office Sought <i>COLUMBUS SCHOOL BOARD</i>		District		
City <i>Columbus</i>						State <i>OH</i>	Zip Code <i>43224</i>		
Type of Report (place X to the left of report type)	<input type="checkbox"/>	Pre-Primary		<input type="checkbox"/>	Post-Primary		<input checked="" type="checkbox"/>	Post-General	
	<input type="checkbox"/>	July		<input type="checkbox"/>	August		<input type="checkbox"/>	September	
	<input type="checkbox"/>	Monthly		<input type="checkbox"/>	Monthly		<input type="checkbox"/>	Termination	
Amended Report? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Report Electronically filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Date of Election		M <i>11</i>	D <i>03</i>	Y <i>09</i>

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box. No other forms are required at a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$ <i>8,771.03</i>
2. Total monetary contributions (From Form No. 31-A)	\$ <i>21,235.00</i>
3. Total other income (From Form No. 31-A-2)	\$ <i>—</i>
4. Total funds available (sum of lines 1, 2, 3)	\$ <i>30,006.03</i> <del>0.00</del>
5. Total monetary expenditures (From Form No. 31-B)	\$ <i>25,584.90</i>
6. Balance on hand (line 4 minus line 5)	\$ <i>4,421.13</i> <del>0.00</del>
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$ <i>—</i>
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$ <i>—</i>
9. Outstanding loans owed by committee (From Form No. 31-C)	\$ <i>—</i>
10. Outstanding debts owed by committee (From Form No. 31-N)	\$ <i>—</i>
11. Outstanding loans owed to committee (From Form No. 31-K)	\$ <i>—</i>
12. Value of independent expenditures made (From Form No. 31-U)	\$ <i>—</i>
13. For Electronic Filing Entities only	\$ <i>—</i>
Sum of lines 2, 7 and amount of any new loans received this period	\$ <i>—</i>

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

*Lisa Carter-Treasurer*      *Lisa Carter*      *12/11/09*  
 Print Name and Title (Treasurer and Deputy Treasurer only)      Signature      Date

Contribution pages 3

Expenditure pages 1

Other pages \_\_\_\_\_

Total pages 0

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Friends to Elect Perkins</b>							
Full Name of Contributor <b>Kathleen H. + Frederick Ransier II</b>						Registration Number, if PAC	
Street Address <b>1801 E. Long St</b>			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43203</b>	M <b>10</b>	D <b>17</b>	Y <b>09</b>	Amount <b>200.<sup>00</sup></b>	
Full Name of Contributor <b>OAPSE AFSOME Turnaround Ohio PAC 1A1269</b>						Registration Number, if PAC <b>LA 1269</b>	
Street Address <b>6805 Oak Creek Dr</b>			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43229</b>	M <b>10</b>	D <b>15</b>	Y <b>09</b>	Amount <b>15,000.<sup>00</sup></b>	
Full Name of Contributor <b>Columbus Franklin County AFL-CIO</b>						Registration Number, if PAC	
Street Address <b>1545 Alum Creek Dr</b>			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>10</b>	D <b>23</b>	Y <b>09</b>	Amount <b>500.<sup>00</sup></b>	
Full Name of Contributor <b>Michael + Marsha Taylor</b>						Registration Number, if PAC	
Street Address <b>4139 Marsol Ave</b>			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Grove City</b>	State <b>OH</b>	Zip Code <b>43123</b>	M <b>10</b>	D <b>16</b>	Y <b>09</b>	Amount <b>25.<sup>00</sup></b>	
Full Name of Contributor <b>Willard Ruby House</b>						Registration Number, if PAC	
Street Address <b>1278 Briar Meadow Dr</b>			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Worthington</b>	State <b>OH</b>	Zip Code <b>43235</b>	M <b>10</b>	D <b>18</b>	Y <b>09</b>	Amount <b>50.<sup>00</sup></b>	
Full Name of Contributor <b>Richard Crockett</b>						Registration Number, if PAC	
Street Address <b>8599 Swisher Creek Crossing</b>			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>	
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>	M <b>10</b>	D <b>14</b>	Y <b>09</b>	Amount <b>3,000.<sup>00</sup></b>	
Full Name of Contributor <b>Diana Bryant</b>						Registration Number, if PAC	
Street Address <b>5339 Longshadow Dr</b>			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Westerville</b>	State <b>OH</b>	Zip Code <b>43081</b>	M <b>10</b>	D <b>15</b>	Y <b>09</b>	Amount <b>50.<sup>00</sup></b>	
Full Name of Contributor <b>Donna Turner</b>						Registration Number, if PAC	
Street Address <b>2089 Clipper Park</b>			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) <b>Check</b>	
City <b>Baltimore</b>	State <b>OH MD</b>	Zip Code <b>21211</b>	M <b>10</b>	D <b>17</b>	Y <b>09</b>	Amount <b>50.<sup>00</sup></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 also appear. [R.C. 3517.10(B)(4)]

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Friends to Elect Perkins</u>										
Full Name of Contributor <u>Stan Alverson</u>							Registration Number, if PAC			
Street Address				Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <u>Check</u>			
City		State <u>OH</u>	Zip Code		M <u>10</u>	D <u>28</u>	Y <u>09</u>	Amount <u>50<sup>00</sup></u>		
Full Name of Contributor <u>Anna Geter</u>										
Street Address <u>2071 Jane Ave</u>							Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <u>Check</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43219</u>		M <u>10</u>	D <u>28</u>	Y <u>09</u>	Amount <u>50<sup>00</sup></u>		
Full Name of Contributor <u>Carol Ware</u>										
Street Address <u>6485 Ash Rock Circle</u>							Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <u>Cash</u>
City <u>Westerville</u>		State <u>OH</u>	Zip Code <u>43081</u>		M <u>11</u>	D <u>02</u>	Y <u>09</u>	Amount <u>20<sup>00</sup></u>		
Full Name of Contributor <u>Dan Moncrief III</u>										
Street Address <u>1324 E. 11th Ave</u>							Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <u>Check</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43211</u>		M <u>11</u>	D <u>02</u>	Y <u>09</u>	Amount <u>500<sup>00</sup></u>		
Full Name of Contributor <u>Mattie James</u>										
Street Address							Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <u>Cash</u>
City		State <u>OH</u>	Zip Code		M <u>11</u>	D <u>04</u>	Y <u>09</u>	Amount <u>50<sup>00</sup></u>		
Full Name of Contributor <u>Ann Crane</u>										
Street Address <u>3600 Kitzmiller Rd</u>							Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <u>Check</u>
City <u>New Albany</u>		State <u>OH</u>	Zip Code <u>43054</u>		M <u>10</u>	D <u>28</u>	Y <u>09</u>	Amount <u>200<sup>00</sup></u>		
Full Name of Contributor <u>William Johnston</u>										
Street Address <u>94 North Woods Blvd Ste B-1</u>							Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <u>Check</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43235</u>		M <u>10</u>	D <u>30</u>	Y <u>09</u>	Amount <u>75<sup>00</sup></u>		
Full Name of Contributor <u>Charlene Jackson</u>										
Street Address <u>6741 Nagle Ave Apt 2</u>							Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <u>Check</u>
City <u>Van Nuys</u>		State <u>OH-CA</u>	Zip Code <u>91401</u>		M <u>10</u>	D <u>26</u>	Y <u>09</u>	Amount <u>25<sup>00</sup></u>		

\* 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)]

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Friends to Elect Perkins</b>									
Full Name of Contributor <b>Robert + Sarah Perry</b>							Registration Number, if PAC		
Street Address <b>2720 Los Pinos Circle</b>				Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Santa Rosa Valley</b>		State <b>OH-CA</b>		Zip Code <b>93012</b>		M   D   Y <b>10   27   09</b>		Amount <b>25.00</b>	
Full Name of Contributor <b>Keith Lehrs + Charles Showers</b>							Registration Number, if PAC		
Street Address <b>20801 Nordhoff St</b>				Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Chatsworth</b>		State <b>OH-CA</b>		Zip Code <b>91311</b>		M   D   Y <b>10   27   09</b>		Amount <b>25.00</b>	
Full Name of Contributor <b>Carl Kolb</b>							Registration Number, if PAC		
Street Address <b>P527 Victory Blvd</b>				Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Reseda</b>		State <b>OH-CA</b>		Zip Code <b>91335</b>		M   D   Y <b>10   28   09</b>		Amount <b>25.00</b>	
Full Name of Contributor <b>Anthony + Yvette Brown</b>							Registration Number, if PAC		
Street Address <b>643 Crossing Creek S</b>				Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>		
City <b>Arabanna</b>		State <b>OH</b>		Zip Code <b>43230</b>		M   D   Y <b>11   10   09</b>		Amount <b>200.00</b>	
Full Name of Contributor <b>E. Dianne McKinn</b>							Registration Number, if PAC		
Street Address <b>3197 Cannock Lane</b>				Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Cash</b>		
City <b>Columbus</b>		State <b>OH</b>		Zip Code <b>43219</b>		M   D   Y <b>11   23   09</b>		Amount <b>115.00</b>	
Full Name of Contributor <b>Transport Workers Union</b>							Registration Number, if PAC		
Street Address <b>1700 Broadway, 2nd Fl</b>				Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>		
City <b>New York</b>		State <b>OH-NY</b>		Zip Code <b>10019-5905</b>		M   D   Y <b>10   29   09</b>		Amount <b>1,000</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	
		<b>OH</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	
		<b>OH</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 also appear. [R.C. 3517.10(B)(4)]

**1,390.00**  
Page Total **\$0.00**

# Statement of Expenditures

Prescribed by Secretary of State 2/01

Name of Committee in Full										
To Whom Paid							M	D	Y	Amount
Friends to Elect Perkins										
Jonathan Vanner + Associates							11	218	09	19,700. <sup>00</sup>
Address			Purpose							
1580 King Ave, Ste 104			Mailing + handouts							
City		State	Zip Code	Check Number						
Columbus		OH	43212	563						
To Whom Paid							M	D	Y	Amount
Capitol City Women							11	311	09	50. <sup>00</sup>
Address			Purpose							
Jefferson Country Club			Donation							
City		State	Zip Code	Check Number						
Columbus		OH		564						
To Whom Paid							M	D	Y	Amount
Chester Wilcox + Saybe							11	011	09	1,165. <sup>65</sup>
Address			Purpose							
65 E State St Suite 100			Legal							
City		State	Zip Code	Check Number						
Columbus		OH	43215	565						
To Whom Paid							M	D	Y	Amount
Tim Horton							11	013	09	33. <sup>79</sup>
Address			Purpose							
3475 Cleveland Ave			Election Day Volunteer							
City		State	Zip Code	Check Number						
Columbus		OH	43224	Debit Purchase						
To Whom Paid							M	D	Y	Amount
Fed Ex Kinkos							11	115	09	97. <sup>99</sup>
Address			Purpose							
4157 Morse Crossing			Thank You Notes							
City		State	Zip Code	Check Number						
Columbus		OH	43219	Debit Purchase						
To Whom Paid							M	D	Y	Amount
Emory Solutions							11	113	09	1,500. <sup>00</sup>
Address			Purpose							
3157 Zach Ct			Campaign Management							
City		State	Zip Code	Check Number						
Columbus		OH	43219	566						
To Whom Paid							M	D	Y	Amount
McTigue + McGinnis							11	113	09	3,037. <sup>50</sup>
Address			Purpose							
550 E Walnut St			Legal							
City		State	Zip Code	Check Number						
Columbus		OH	43215	567						
To Whom Paid							M	D	Y	Amount
Address			Purpose							
City		State	Zip Code	Check Number						