

# Ohio Campaign Finance Report

Prescribed by Secretary of State 3/05

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Full Name of Committee <b>Committee to Elect Andrea Peeples for Judge</b>							Registration Number, if PAC FRANKLIN COUNTY BOARD OF ELECTIONS			
Full Name of Candidate <b>Andrea C. Peeples</b>										
Street Address <b>21 E. State Street</b>						Office Sought <b>Franklin County Municipal Court Judge</b>		District		
City <b>Columbus</b>						State <b>O H</b>		Zip Code <b>43215</b>		
Type of Report (place X to the left of report type)	Pre-Primary		<b>X</b>	Post-Primary		Pre-General		Post-General		Annual Year
	July			August		September		Termination		Semiannual
Monthly			Monthly		Monthly					
Amended Report? <input type="checkbox"/> Yes <input type="checkbox"/> No			Report Electronically filed? <input type="checkbox"/> Yes <input type="checkbox"/> No			Date of Election		M	D	Y
						<b>1 1</b>		<b>0 8</b>	<b>0 5</b>	

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	\$	7,400.00
2. Total monetary contributions (From Form No. 3)	\$	6,630.00
3. Total other income (From Form No. 3)	\$	0.00
4. Total funds available (sum of lines 1, 2, & 3)	\$	14,030.00
5. Total monetary expenditures (From Form No. 4)	\$	5,135.59
6. Balance on hand (line 4 minus line 5)	\$	8,894.41
7. Value of in-kind contributions received (From Form No. 4)	\$	51.42
8. Value of in-kind contributions given (From Form No. 4)	\$	0.00
9. Outstanding loans owed by committee (From Form No. 4)	\$	7,500.00
10. Outstanding debts owed by committee (From Form No. 4)	\$	0.00
11. Outstanding debts owed to committee (From Form No. 4)	\$	0.00
12. Value of independent expenditures made (From Form No. 15)	\$	0.00
13. For Electronic Filing Entry	\$	
Sum of lines 7 and amount of in-kind loans received (From Form No. 4)	\$	

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

John Curp, Treasurer      John P. Curp      6/09/05  
Print Name and Title (Treasurer and Deputy Treasurer only)      Signature      Date

Contribution pages 16

Expenditure pages 5

Other pages 2

Total pages 23

# Statement of Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>COMMITTEE TO ANDREA PEEPLES FOR JUDGE</b>									
Full Name of Contributor <b>MICHAEL DERFLINGER JR</b>						Registration Number, if PAC			
Street Address <b>4295 TARBEN WOODS</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>COLUMBUS</b>		State <b>O   H</b>	Zip Code <b>43230</b>		M <b>0   5</b>	D <b>2   1</b>	Y <b>0   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>ELIZABETH RAREY</b>						Registration Number, if PAC			
Street Address <b>8081 WORTHINGTON ROAD</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>GALENA</b>		State <b>O   H</b>	Zip Code <b>43021</b>		M <b>0   5</b>	D <b>1   9</b>	Y <b>0   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>JEFFREY GREENBERG</b>						Registration Number, if PAC			
Street Address <b>1742 RIVER RIDGE DRIVE</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>SPRING VALLEY</b>		State <b>O   H</b>	Zip Code <b>45370</b>		M <b>0   5</b>	D <b>2   2</b>	Y <b>0   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>ELIZABETH M HARDEN</b>						Registration Number, if PAC			
Street Address <b>6404 STOLL LANE</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   5</b>	D <b>2   2</b>	Y <b>0   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>BARBARA RICH</b>						Registration Number, if PAC			
Street Address <b>2749 BELLA VIA AVE</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>COLUMBUS</b>		State <b>O   H</b>	Zip Code <b>43231</b>		M <b>0   5</b>	D <b>1   2</b>	Y <b>0   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>JOSEPH CAVANESS</b>						Registration Number, if PAC			
Street Address <b>106 DAVIS ROAD</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>MONTICELLO</b>		State <b>A   K</b>	Zip Code <b>71655</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>KENT MARKUS</b>						Registration Number, if PAC			
Street Address <b>5636 INDIAN HILL RD</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>CHECK</b>		
City <b>DUBLIN</b>		State <b>O   H</b>	Zip Code <b>43017</b>		M <b>0   5</b>	D <b>0   6</b>	Y <b>0   5</b>	Amount <b>100.00</b>	
Full Name of Contributor <b>YAVITCH &amp; PALMER CO. L.P.A.</b>						Registration Number, if PAC			
Street Address <b>511 S. HIGH 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   5</b>	D <b>0   9</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)]

# 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>

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Name of Committee in Full <b>COMMITTEE TO ELECT ANDREA PEEPLES FOR JUDGE</b>							
Full Name of Contributor <b>SANA BARRETT</b>					Registration Number, if PAC		
Street Address <b>114 BROADMEADOW BLVD APT B</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43214</b>	M <b>0   5</b>	D <b>0   6</b>	Y <b>0   5</b>	Amount <b>10.00</b>	
Full Name of Contributor <b>SHERRY LYNN CAFFEY</b>					Registration Number, if PAC		
Street Address <b>4790 E LIVINGSTON RD</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43227</b>	M <b>0   5</b>	D <b>0   6</b>	Y <b>0   5</b>	Amount <b>10.00</b>	
Full Name of Contributor <b>PAULA LLOYD</b>					Registration Number, if PAC		
Street Address <b>8055 FAIRWAY DR</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43235</b>	M <b>0   5</b>	D <b>0   6</b>	Y <b>0   5</b>	Amount <b>20.00</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>CYNDY SECKERSON</b>					Registration Number, if PAC		
Street Address <b>4551 HUCKLEBERRY CT</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>HILLIARD</b>	State <b>O   H</b>	Zip Code <b>43026</b>	M <b>0   5</b>	D <b>2   6</b>	Y <b>0   5</b>	Amount <b>10.00</b>	
Full Name of Contributor <b>DAVE PETERSON</b>					Registration Number, if PAC		
Street Address <b>4551 HUCKLEBERRY CT</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>HILLIARD</b>	State <b>O   H</b>	Zip Code <b>43026</b>	M <b>0   5</b>	D <b>2   6</b>	Y <b>0   5</b>	Amount <b>10.00</b>	
Full Name of Contributor <b>JOYE SAUNDERS</b>					Registration Number, if PAC		
Street Address <b>3596 BREMEN ST</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43224</b>	M <b>0   5</b>	D <b>2   6</b>	Y <b>0   5</b>	Amount <b>20.00</b>	
Full Name of Contributor <b>KRISTOPHER HAINES</b>					Registration Number, if PAC		
Street Address <b>3572 JUNIPER ST</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>GROVE CITY</b>	State <b>O   H</b>	Zip Code <b>43123</b>	M <b>0   5</b>	D <b>2   6</b>	Y <b>0   5</b>	Amount <b>20.00</b>	

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# 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>ADAM ELIOT</b>					Registration Number, if PAC		
Street Address <b>400 S. FIFTH ST</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M <b>0   5</b>	D <b>2   6</b>	Y <b>0   5</b>	Amount <b>30.00</b>	
Full Name of Contributor <b>CARA ORR</b>					Registration Number, if PAC		
Street Address <b>139 WESTVIEW</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43214</b>	M <b>0   5</b>	D <b>2   6</b>	Y <b>0   5</b>	Amount <b>10.00</b>	
Full Name of Contributor <b>TIM MANGAN</b>					Registration Number, if PAC		
Street Address <b>873 FALKIRK CT</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>PICKAWAY</b>	State <b>O   H</b>	Zip Code <b>43147</b>	M <b>0   5</b>	D <b>2   6</b>	Y <b>0   5</b>	Amount <b>10.00</b>	
Full Name of Contributor <b>JEFFREY BENNINGTON</b>					Registration Number, if PAC		
Street Address <b>508 SPRINGHOLLOW ROAD</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>CIRCLEVILLE</b>	State <b>O   H</b>	Zip Code <b>43113</b>	M <b>0   5</b>	D <b>2   6</b>	Y <b>0   5</b>	Amount <b>20.00</b>	
Full Name of Contributor <b>BILL HEDRICK</b>					Registration Number, if PAC		
Street Address <b>838 THURBER DRIVE WEST APT22</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) <b>CASH</b>		
City <b>COLUMBUS</b>	State <b>O   H</b>	Zip Code <b>43215</b>	M <b>0   5</b>	D <b>2   6</b>	Y <b>0   5</b>	Amount <b>10.00</b>	
Full Name of Contributor <b>CONTRIBUTIONS FROM FORM 31-E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M <b>0   4</b>	D <b>1   4</b>	Y <b>0   5</b>	Amount <b>2,250.00</b>	
Full Name of Contributor <b>CONTRIBUTIONS FROM FORM 31-E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M <b>0   5</b>	D <b>0   6</b>	Y <b>0   5</b>	Amount <b>1,025.00</b>	
Full Name of Contributor <b>CONTRIBUTIONS FROM FORM 31-E</b>					Registration Number, if PAC		
Street Address		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)		
City	State	Zip Code	M <b>0   5</b>	D <b>1   9</b>	Y <b>0   5</b>	Amount <b>825.00</b>	

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