

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

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Friends to Elect Perkins</u>				Registration Number, if PAC	
Full Name of Contributor <u>Suzanne + Mark Hatch</u>				M D Y Amount <u>10/13/09</u> <u>50.00</u>	
Street Address <u>4189 Rowanne Rd</u>		Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) <u>Check</u>	
City <u>Columbus</u>	State <u>OH</u>	Zip Code <u>43214</u>			
Full Name of Contributor <u>Gayzelle Nash</u>				Registration Number, if PAC	
Street Address <u>6670 Axlet Dr</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>10/13/09</u> <u>25.00</u>	
City <u>Canal Winchester</u>		State <u>OH</u>	Zip Code <u>43110</u>		Form (Cash, Check, etc.) <u>Check</u>
Full Name of Contributor <u>Friends For Guntner</u>				Registration Number, if PAC	
Street Address <u>98 Montrose Way</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>10/12/09</u> <u>500.00</u>	
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43214</u>		Form (Cash, Check, etc.) <u>Check</u>
Full Name of Contributor <u>Rambonedu</u>				Registration Number, if PAC	
Street Address <u>63 N. Ohio Ave</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>10/13/09</u> <u>50.00</u>	
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43203</u>		Form (Cash, Check, etc.) <u>Check</u>
Full Name of Contributor <u>Frederick + Linda Karney</u>				Registration Number, if PAC	
Street Address <u>971 Washington St</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>10/13/09</u> <u>50.00</u>	
City <u>Pickerington</u>		State <u>OH</u>	Zip Code <u>43147</u>		Form (Cash, Check, etc.) <u>Check</u>
Full Name of Contributor <u>Belinda Taylor</u>				Registration Number, if PAC	
Street Address <u>1266 Seymour Ave</u>		Employer/Occupation/Labor Organization*		M D Y Amount <u>10/13/09</u> <u>50.00</u>	
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43206</u>		Form (Cash, Check, etc.) <u>Check</u>
Full Name of Contributor <u>Vivian Turner</u>				Registration Number, if PAC	
Street Address		Employer/Occupation/Labor Organization*		M D Y Amount <u>10/13/09</u> <u>50.00</u>	
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43219</u>		Form (Cash, Check, etc.) <u>Check</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)]

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

\$0.00

Total expenditures this event.

\$0.00

\$775.00

Page Total \$