## Event Date 1/24/11 Page 5

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

	Prescribed by Secret	tary of State 03/05		
Name of Committee in Full  Committee to Re-Elect Judge Peeples				
	,		Registration Number, if PAC	
Full Name of Contributor Kathleen Addlesperger			Registration Number, it PAC	
Street Address	Employer/Occup	pation/Labor Organization*	M D Y Amount	
1336 Carolyn Avenue		C	0 1 2 4 1 1 \$25.0	rO
City	State	Zip Code	Form (Cash, Check, etc.)	1
Columbus	OH	43224	Check	100
Full Name of Contributor	1 :		Registration Number, if PAC	
Nathan Sei Akamine				
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount	
844 S. Front St.	Employer, occup	organization	0 1 2 4 1 1 \$100.	00
City	Sta te	Zip Code	Form (Cash, Check, etc.)	nite.
Columbus	ОН	43206	Check	
Full Name of Contributor	1 011	70200	Registration Number, if PAC	
Cliff Arnbeck			in a grant and a g	
Street Address			M D Y Amount	
49 S. Monroe Ave.	Employer/Occup	oation/Labor Organization*	0 1 2 4 1 1 \$25.0	Λ
City	Sta te	Zip Code	Form (Cash, Check, etc.)	· · · · · · · · · · · · · · · · · · ·
Columbus	OH	43205	Check	. 201 May
Full Name of Contributor	On	43203	, i	Are do
			Registration Number, if PAC	
Jeffrey M. Basnett				
Street Address	Employer/Occupation/Labor Organization*		M D Y Amount	
282 Woodland Ave.		,	0 1 2 4 1 1 \$50.0	)()
City	Sta <sub>i</sub> te	Zip Code	Form (Cash, Check, etc.)	(1.5)
Columbus	OH	43203	Check	
Full Name of Contributor Jeffrey A. Berndt			Registration Number, if PAC	
Street Address 575 S. High St.	Employer/Occup	nation/Labor Organization*	M D Y Amount 0 1 1 3 1 1 \$75.0	10
		1		0
City Columbus	Sta to	Zip Code 43215	Form (Cash, Check, etc.) Check	1,140
	OH	43213		1.41247
Full Name of Contributor			Registration Number, if PAC	
Leslie Chappelear				
Street Address 2120 Demorest Road	Employer/Occupation/Labor Organization*		M D Y Amount 0 1 3 1 1 \$25.0	^
				U
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Grove City	OH		Cash	2.9 304
Full Name of Contributor			Registration Number, if PAC	
Chris Cicero				
Street Address	Employer/Occup	oation/Labor Organization*	M D Y Amount	
1308 W. Mound St.			0 1 1 3 1 1 \$100.	.00
City	Sta te	Zip Code	Form (Cash, Check, etc.)	
Columbus	OH	43223	Cash	
* Required for contributions from individuals over \$10	00 to statewide and General As	ssembly candidates. If contrib	ator is self-employed, the occupation and	the name of
the individual's business, if any, rather than employer	should be listed. If two or mor	e employees contribute via pa	yroll deduction and exceed the aggregate	of \$100, the
labor organization of which the employees are member	rs, if any, must also appear. [F	R.C. 3517.10(B)(4)]		
Fill in the boxes below only on the last page for this eve	ent			
Transfer the Total contributions for this event to form N		Contributor state "Contribution	ons from form No. 31-E" and list the date	of the event
in the date column				

Total contributions this event	Total expenditures this event.
	Page Total \$ \$400.00
	135 1000