

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children							
Full Name of Contributor Les Wright & Associates						Registration Number, if PAC	
Street Address 2268 Liston Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43207	M 0	D 8	Y 0	Amount \$250.00	
Full Name of Contributor Linda J Jordan						Registration Number, if PAC	
Street Address 4853 Glenburn Ave			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43214	M 0	D 8	Y 0	Amount \$30.00	
Full Name of Contributor Susan M Samuel						Registration Number, if PAC	
Street Address 3466 Northwood St			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43224	M 0	D 8	Y 0	Amount \$30.00	
Full Name of Contributor Patricia G Matheny						Registration Number, if PAC	
Street Address RR1 Box 554			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Sugar Grove	State OH	Zip Code 43155	M 0	D 8	Y 0	Amount \$30.00	
Full Name of Contributor Vickie L Kennedy						Registration Number, if PAC	
Street Address 1500-B Burstock Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	M 0	D 8	Y 0	Amount \$30.00	
Full Name of Contributor Mary E Young						Registration Number, if PAC	
Street Address 4590 Knightsbridge Blvd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43214	M 0	D 8	Y 0	Amount \$30.00	
Full Name of Contributor Maureen Bosart						Registration Number, if PAC	
Street Address 3126 Melbury Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 8	Y 0	Amount \$50.00	
Full Name of Contributor Kara M Newbury						Registration Number, if PAC	
Street Address 2100 Lee Hwy Apt 148			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Arlington	State VA	Zip Code 22201	M 0	D 8	Y 0	Amount \$150.00	

* 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)]