Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Gibbs 4 Kids Committee				
Full Name of Contributor Contributions from Form 31-E			Registration Number, if PAC	
Street Address	Employer/Occu	pation/Labor Organization*	· · · · · · · · · · · · · · · · · · ·	Form (Cash, Check, etc.)
City	State OH	Zip Code	0 7 1 2 0 7	Amount \$1,155.00
Full Name of Contributor			Registration Number, if	PAC
Contributions from Form 31-E				
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	0 7 1 3 0 7	Amount \$650.00
Full Name of Contributor Contributions from Form 31-E			Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	0 7 2 1 0 7	Amount \$950.00
Full Name of Contributor Contributions from Form 31-E			Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
City	State OH	Zip Code	1 0 1 1 0 7	Amount \$955.00
Full Name of Contributor Deena Chisolm	. <u>.</u> .		Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
3173 Cannock Lane		Tax a d	114 124 146	Check
City Columbus	State OH	Zip Code 43219	$\begin{bmatrix} 1^{\text{M}} \\ 0 \end{bmatrix} \begin{bmatrix} 0 \\ 1 \end{bmatrix} \begin{bmatrix} 0 \\ 0 \end{bmatrix} $	420.00
Full Name of Contributor Lisa Robinson Registrati			Registration Number, if	PAC
Street Address 1079 Oxfordshire Drive	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43228	0 9 0 1 0 7	Amount \$25.00
Full Name of Contributor Linda Stallworth			Registration Number, if	PAC
Street Address 1187 E. Long Street	Employer/Occu	Employer/Occupation/Labor Organization		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43203	0 9 1 7 0 7	Amount \$25.00
Full Name of Contributor Wanda Dillard			Registration Number, if	PAC
Street Address 1089 Wildwood Ave	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.) Check
City Columbus	State OH	Zip Code 43219	1 0 0 1 0 7	Amount \$25.00

Page Total \$3,810.00

^{*} 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)]