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Statement of Contributions Received

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Page		

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children	-			
Full Name of Contributor			Registration Number, if F	PAC
Kevin Jenkins			-	
Street Address	Employer/Occi	upation/Labor Organization		Form (Cash, Check, etc.)
1282 Fairway Dr NE				Cash
City New Philadelphia	State OH	Zip Code 44663	M D Y O 7 1 7 1 4	Amount \$220.00
Full Name of Contributor			Registration Number, if P	AC
Fundraiser				
Street Address	Employer/Occu	upation/Labor Organization		Form (Cash, Check, etc.) Cash
City	State OH	Zip Code	M D Y	Amount \$100.00
Full Name of Contributor			Registration Number, if P	1
Peter P Stevens		_	Registration France, 11	·
Street Address 8383 Gleneagles Ct	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) Check
City	State	Zip Code	M D Y	Amount
· Dublin	OH	43017	0 7 1 7 1 4	\$600.00
Full Name of Contributor Keith R Roberts			Registration Number, if P	_
Street Address	Employer/Occu	upation/Labor Organization		Form (Cash, Check, etc.)
5300 Castle Pines Ln City	State	Zip Code	M D Y	Check
Knoxville	TN	37920	0 7 1 7 1 4	\$150.00
Full Name of Contributor Bruce L Caldwallader			Registration Number, if P.	AC
Street Address	Employer/Occu	upation/Labor Organization*		Form (Cash, Check, etc.)
8549 Warriner Way				Check
City Canal Winchester	State OH	Zip Code 43110	0 7 1 7 1 4	Amount \$150.00
Full Name of Contributor			Registration Number, if P.	AC
Fundraiser				
Street Address	Employer/Occu	upation/Labor Organization		Form (Cash, Check, etc.) Cash
City	State OH	Zip Code	071714	Amount \$600.00
Full Name of Contributor	<u> </u>		Registration Number, if P	AC
Samuel A Moore				
Street Address 2283 Buttercup Ln	Employer/Occu	upation/Labor Organization		Form (Cash, Check, etc.) Check
City Grove City	State OH	Zip Code 43123	M D Y O 7 1 7 1 4	Amount \$150.00
Full Name of Contributor Charles M Spinning		·	Registration Number, if P.	AC
Street Address	Employer/Ocet	upation/Labor Organization*		Form (Cash, Check, etc.)
115 W Jamestown St				Check
City South Charleston	State OH	Zip Code 45368	$\begin{bmatrix} M & D & Y \\ 0 & 7 & 1 & 7 & 1 & 4 \end{bmatrix}$	Amount \$150.00

Page Total \$2,120.00

^{*} 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)]