

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children						
Full Name of Contributor Darci L Congrove				Registration Number, if PAC		
Street Address 756 Jaeger St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	M 0	D 9	Y 2	Amount \$250.00
Full Name of Contributor Miranda E Morgan				Registration Number, if PAC		
Street Address 8267 Flagg View Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Powell	State OH	Zip Code 43065	M 0	D 9	Y 2	Amount \$40.00
Full Name of Contributor Susan Rector				Registration Number, if PAC		
Street Address 67 E Deshler Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor Ruth McNeil				Registration Number, if PAC		
Street Address 1494 Lafayette Dr Apt B		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Upper Arlington	State OH	Zip Code 43220	M 0	D 9	Y 2	Amount \$25.00
Full Name of Contributor Elizabeth Heyer				Registration Number, if PAC		
Street Address 2409 Plymouth Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Bexley	State OH	Zip Code 43209	M 0	D 9	Y 2	Amount \$50.00
Full Name of Contributor Jane A Rumora				Registration Number, if PAC		
Street Address 390 Gender Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Canal Winchester	State OH	Zip Code 43110	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor Elizabeth E Hall				Registration Number, if PAC		
Street Address 67 West 109th St APT A		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City New York	State NY	Zip Code 10025	M 0	D 9	Y 2	Amount \$200.00
Full Name of Contributor Clarence S Ball				Registration Number, if PAC		
Street Address 1344 Kelton Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	M 0	D 9	Y 2	Amount \$50.00

* 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)]