

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children											
Full Name of Contributor David Pallone						Registration Number, if PAC					
Street Address 9950 Heron Drive			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check					
City Thornville		State OH	Zip Code 43076		M 0	D 4	Y 2	Y 8	Y 0	Y 9	Amount \$50.00
Full Name of Contributor Ashlee Pfile						Registration Number, if PAC					
Street Address 341 E Main St			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check					
City Circleville		State OH	Zip Code 43113		M 0	D 4	Y 2	Y 9	Y 0	Y 9	Amount \$25.00
Full Name of Contributor Michael Preston						Registration Number, if PAC					
Street Address 4838 Downing Dr			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check					
City Columbus		State OH	Zip Code 43232		M 0	D 4	Y 2	Y 9	Y 0	Y 9	Amount \$25.00
Full Name of Contributor Pamela K Prosser						Registration Number, if PAC					
Street Address 3128 Dublin Road			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check					
City Columbus		State OH	Zip Code 43221		M 0	D 4	Y 2	Y 9	Y 0	Y 9	Amount \$25.00
Full Name of Contributor David Royer						Registration Number, if PAC					
Street Address 5517 Tayside Cir			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check					
City Dublin		State OH	Zip Code 43016		M 0	D 4	Y 2	Y 9	Y 0	Y 9	Amount \$100.00
Full Name of Contributor Anne Santilli						Registration Number, if PAC					
Street Address 357 East Moler Street			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check					
City Columbus		State OH	Zip Code 43207		M 0	D 4	Y 2	Y 9	Y 0	Y 9	Amount \$25.00
Full Name of Contributor Pamela Schirner						Registration Number, if PAC					
Street Address 1914 Oaklawn Ct			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check					
City Grove City		State OH	Zip Code 43123		M 0	D 4	Y 1	Y 4	Y 0	Y 9	Amount \$100.00
Full Name of Contributor Lisa Schlotzhauer						Registration Number, if PAC					
Street Address 25 Brenton Dr			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check					
City Ashville		State OH	Zip Code 43103		M 0	D 4	Y 2	Y 9	Y 0	Y 9	Amount \$25.00

* 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)]

Page Total **\$375.00**