

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children							
Full Name of Contributor Fundraising Cash						Registration Number, if PAC	
Street Address			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Cash	
City	State OH	Zip Code	M 0	D 8	Y 2	Amount \$202.12	
Full Name of Contributor Robert Marx						Registration Number, if PAC	
Street Address 4677 Greyson Dr			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check	
City Powell	State OH	Zip Code 43065	M 0	D 8	Y 0	Amount \$240.00	
Full Name of Contributor Mainline						Registration Number, if PAC	
Street Address P.O. Box 940			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check	
City Powell	State OH	Zip Code 43065	M 0	D 8	Y 0	Amount \$150.00	
Full Name of Contributor Kathryn Congrove						Registration Number, if PAC	
Street Address 5806 Chiddingstone Ln			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43082	M 0	D 8	Y 0	Amount \$60.00	
Full Name of Contributor Anne OLeary						Registration Number, if PAC	
Street Address 854 Mueller Dr			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 8	Y 0	Amount \$60.00	
Full Name of Contributor James Zorn						Registration Number, if PAC	
Street Address 9585 El Camino Lane			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check	
City Plain City	State OH	Zip Code 43064	M 0	D 8	Y 0	Amount \$60.00	
Full Name of Contributor Robert Mc Claren						Registration Number, if PAC	
Street Address 9481 Welch Rd			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check	
City Orient	State OH	Zip Code 43146	M 0	D 8	Y 0	Amount \$60.00	
Full Name of Contributor Christine Kirk						Registration Number, if PAC	
Street Address 1035 Denman Ct			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	M 0	D 8	Y 1	Amount \$60.00	

* 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 **\$892.12**