Statement of Contributions Received at a Social or Fund-Raising Event Prescribed by Secretary of State 03/05

Event Date 9/16/14	
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			<u> </u>			
Name of Committee in Full Committee 4 Children						
Full Name of Contributor		· · · · · · · · · · · · · · · · · · ·				
Kathleen P Murphy			Registration Number, if	PAC		
Street Address	Employer/Occup.	ation/Labor Organization*	M D Y	Amount		
2416 Southway Dr			0 8 0 7 1 4	\$250.00		
City	Sta te	Zip Code	Form (Cash, Check, etc.)	100		
Columbus	OH	43221	Check			
Full Name of Contributor	Registration Number, if	PAC				
Sue Ann Goetz Doody			Mi Di Yi			
Street Address	Employer/Occup	Employer/Occupation/Labor Organization*		Amount		
2155 Yorkshire Rd		12: 6	0 8 0 7 1 4	\$250.00		
Columbus	Staj te OH	Zip Code	Form (Cash, Check, etc.) Check	144.50		
Columbus Full Name of Contributor	I On	43221				
Anne J Jeffrey			Registration Number, in	Registration Number, if PAC		
Street Address	ElevelO	ation/Labor Organization*	M D Yi	Amount		
296 Ashbourne Pl	Employer/Cicup	ation/Labor Organization*	0 8 0 7 1 4	\$250.00		
City	Sta'te	Zip Code	Form (Cash, Check, etc.)			
Columbus	ОН	43209	Check	17		
Full Name of Contributor	,		Registration Number, if	PAC		
Community Shelter Board						
Street Address	Employer/Occupation/Labor Organization*		M D Y	Amount		
111 Liberty Street, STE 150			0 8 0 7 1 4	\$250.00		
City	Sta te	Zip Code	Form (Cash, Check, etc.)	2.50		
Columbus	OH	43215	Check	***		
Full Name of Contributor Les Wright & Associates			Registration Number, if	PAC		
Street Address 2268 Liston Ave	Employer/Occup	Employer/Occupation/Labor Organization*		Amount \$250.00		
City	Sta te	Zip Code	Form (Cash, Check, etc.)			
Columbus	OH	43207	Check	- July 10		
Full Name of Contributor Janet E Jackson	Registration Number, if PAC					
Street Address 2865 Castlewood Rd	Employer/Occup	ation/Labor Organization*	0 8 1 2 1 4	Amount \$250.00		
City Columbus	Sta'te OH	Zip Code 43209	Form (Cash, Check, etc.) Check	NO.		
Full Name of Contributor Friends of Marilyn Brown	<u> </u>	1	Registration Number, if	PAC		
Street Address 550 East Walnut Street	Employer/Occup	ation/Labor Organization*	0 8 2 7 1 4	Amount \$250.00		
City Columbus	Staj te OH	Zip Code 43215	Form (Cash, Check, etc.) Check			
* Paguiged for contributions from individuals over \$16	00 to statewide and General As	sembly condidates. If contribu	nor is self-employed the occu	ination and the name of		

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contribution	ons this	event
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Total expenditures this event.

1	
\$ 0.00	

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)]