

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children							
Full Name of Contributor James A Cunningham						Registration Number, if PAC	
Street Address 2670 Peachblow Rd			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Lewis Center		State OH	Zip Code 43035	M 0	D 5	Y 2	Amount \$56.00
Full Name of Contributor Bruce L Cadwallader						Registration Number, if PAC	
Street Address 6549 Warriner Way			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Canal Winchester		State OH	Zip Code 43110	M 0	D 5	Y 2	Amount \$50.00
Full Name of Contributor Tina Rutherford						Registration Number, if PAC	
Street Address 5825 Coneflower Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Grove City		State OH	Zip Code 43123	M 0	D 5	Y 2	Amount \$50.00
Full Name of Contributor Judy K Murray						Registration Number, if PAC	
Street Address 13347 Sandover Place NW			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Pickerington		State OH	Zip Code 43147	M 0	D 5	Y 2	Amount \$280.00
Full Name of Contributor Regina A Dudley						Registration Number, if PAC	
Street Address 2861 Bridgeview Drive			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43224	M 0	D 5	Y 2	Amount \$45.00
Full Name of Contributor Maureen Bosart						Registration Number, if PAC	
Street Address 3126 Melbury Dr			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43221	M 0	D 5	Y 2	Amount \$150.00
Full Name of Contributor Ed Mills						Registration Number, if PAC	
Street Address 8922 Oakshire Dr N W			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Pickerington		State OH	Zip Code 43147	M 0	D 5	Y 2	Amount \$50.00
Full Name of Contributor Katherine Schwarz						Registration Number, if PAC	
Street Address 3127 Walden Ravines			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus		State OH	Zip Code 43221	M 0	D 5	Y 2	Amount \$80.00

* 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 **\$761.00**