

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children									
Full Name of Contributor Federation of Franklin County Children Services Employees - Local #3143							Registration Number, if PAC		
Street Address P.O. Box 06617				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43206		M 1		D 0	
						Y 1 3 0 9		Amount \$1,000.00	
Full Name of Contributor Eric Fenner							Registration Number, if PAC		
Street Address 1231 Buoy Ct				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Westerville		State OH		Zip Code 43082		M 1		D 0	
						Y 1 3 0 9		Amount \$200.00	
Full Name of Contributor Marcia Hershfield							Registration Number, if PAC		
Street Address 78 N Parkview Ave				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43209		M 1		D 0	
						Y 1 3 0 9		Amount \$36.00	
Full Name of Contributor Robert J Weiler							Registration Number, if PAC		
Street Address 41 S High St - Ste 1010				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43215		M 1		D 0	
						Y 1 3 0 9		Amount \$1,000.00	
Full Name of Contributor Beech Brook							Registration Number, if PAC		
Street Address 3737 Lander Road				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Pepper Pike		State OH		Zip Code 44124		M 1		D 0	
						Y 1 3 0 9		Amount \$300.00	
Full Name of Contributor The Buckeye Ranch Foundation							Registration Number, if PAC		
Street Address 5665 Hoover Road				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Grove City		State OH		Zip Code 43123		M 1		D 0	
						Y 1 3 0 9		Amount \$5,000.00	
Full Name of Contributor Stonehenge Partners Corp							Registration Number, if PAC		
Street Address 191 W Nationwide Blvd - Ste 600				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Columbus		State OH		Zip Code 43215		M 1		D 0	
						Y 1 3 0 9		Amount \$1,000.00	
Full Name of Contributor Susan Carter							Registration Number, if PAC		
Street Address 3049 Brandon Rd				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Check	
City Upper Arlington		State OH		Zip Code 43221		M 1		D 0	
						Y 1 3 0 9		Amount \$200.00	

* 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 **\$8,736.00**