

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children						
Full Name of Contributor Paula Brooks Committee					Registration Number, if PAC	
Street Address 545 East Town Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 9	Y 2	Amount \$250.00
Full Name of Contributor Columbus School Employees Assoc					Registration Number, if PAC	
Street Address PO Box 13652		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43213	M 0	D 9	Y 2	Amount \$500.00
Full Name of Contributor Betty T Pinkney					Registration Number, if PAC	
Street Address 3166 Berkley Point Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43230	M 0	D 9	Y 2	Amount \$40.00
Full Name of Contributor Patsy Thomas					Registration Number, if PAC	
Street Address 5689 Plum Orchard		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Columbus	State OH	Zip Code 43213	M 0	D 9	Y 2	Amount \$25.00
Full Name of Contributor Melissa Roshan Poker					Registration Number, if PAC	
Street Address 574 Eastpointe Lakes Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Blacklick	State OH	Zip Code 43004	M 0	D 9	Y 2	Amount \$3.00
Full Name of Contributor Tammy Wharton					Registration Number, if PAC	
Street Address 1135 Northwood Cir		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City New Albany	State OH	Zip Code 43054	M 0	D 9	Y 2	Amount \$60.00
Full Name of Contributor Tammy Wharton					Registration Number, if PAC	
Street Address 1135 Northwood Cir		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City New Albany	State OH	Zip Code 43054	M 0	D 9	Y 2	Amount \$40.00
Full Name of Contributor Linda Kanney					Registration Number, if PAC	
Street Address 971 Washington St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Cash	
City Pickerington	State OH	Zip Code 43147	M 0	D 9	Y 2	Amount \$100.00

\* 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 \$1,018.00