## **Statement of Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children				
Full Name of Contributor Melissa P Ingwersen			Registration Number, if PAC	
-		*		Form (Cash, Check, etc.)
Street Address 173 S Parkview Ave	Employer/Occu	pation/Labor Organization*		check
City Columbus	State OH	Zip Code 43209	1 0 2 0 0 9	Amount \$500.00
Full Name of Contributor			Registration Number, if	PAC
Visionary Leaders Institute				
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
5350 E Livingston Ave, Ste A				check
City	State	Zip Code	M D Y	Amount
Columbus	OH	43232	1 0 2 7 0 9	\$500.00
Full Name of Contributor Squire Sanders			Registration Number, if PAC	
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
41 S High Street				check
City	State	Zip Code	M D Y	Amount
Columbus	OH	43215	1 0 2 7 0 9	\$500.00
Full Name of Contributor United Methodist Children's Home	2		Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization*	Separation of the second secon	Form (Cash, Check, etc.)
1033 High Street				check
City	State	Zip Code	M D Y	Amount
Worthington	OH	43085	1 0 2 7 0 9	\$3,500.00
Full Name of Contributor Parenthesis Family Advocates			Registration Number, if	PAC
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
6500 Taylor Road SW				check
City	State	Zip Code	M D Y	Amount
Reynoldsburg	OH	43068	1 0 2 7 0 9	<b>4</b> ., . =
Full Name of Contributor			Registration Number, if PAC	
Steve Allen			100	
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
4040 Baughman Grant				check
City	State	Zip Code	M D Y	Amount
New Albany	OH	43054	102709	\$250.00
Full Name of Contributor			Registration Number, if	PAC
Bricker & Eckler LLP				
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
100 S Third St				check
City Columbus	Stake OH	Zip Code 43215	1 0 2 7 0 9	Amount \$350.00
Full Name of Contributor Limited Brands			Registration Number, if	PAC
Street Address	Employer/Occu	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.)
3 Limited Parkway		· ~		check
City	State	Zip Code	M D Y	Amount
Columbus	OH	43230	1 0 2 7 0 9	\$10,000.00

Page Total \$16,725.00

<sup>\*</sup> 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)]