

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children						
Full Name of Contributor UMCH Family Services					Registration Number, if PAC	
Street Address 1033 High Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Worthington	State OH	Zip Code 43085	M 1	D 0	Y 2	Amount \$2,000.00
Full Name of Contributor Granite Foundation					Registration Number, if PAC	
Street Address 1876 Gluek Ln		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Roseville	State MN	Zip Code 55113	M 1	D 0	Y 3	Amount \$700.00
Full Name of Contributor Youth Advocate Services, Inc.					Registration Number, if PAC	
Street Address 825 Grandview Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 1	D 0	Y 3	Amount \$500.00
Full Name of Contributor OhioGuidestone					Registration Number, if PAC	
Street Address 202 E Bagley Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Berea	State OH	Zip Code 44017	M 1	D 0	Y 3	Amount \$2,000.00
Full Name of Contributor NYAP - Ohio					Registration Number, if PAC	
Street Address 1801 Watermark Drive, #200		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 1	D 1	Y 3	Amount \$2,250.00
Full Name of Contributor New Horizon Youth Center LLC					Registration Number, if PAC	
Street Address 40060 National Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Bethesda	State OH	Zip Code 43719	M 1	D 1	Y 3	Amount \$600.00
Full Name of Contributor St. Stephen's Community House					Registration Number, if PAC	
Street Address 1500 East 17th Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43219	M 1	D 1	Y 3	Amount \$3,200.00
Full Name of Contributor Maryhaven					Registration Number, if PAC	
Street Address 1791 Alum Creek Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43207	M 1	D 1	Y 3	Amount \$5,000.00

* 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 **\$16,250.00**