

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children									
Full Name of Contributor Richard Roberts							Registration Number, if PAC		
Street Address 411 West Lincoln Street				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Paypal	
City Columbus		State OH		Zip Code 43215		M 1		D 0	
						Y 0		Amount \$10.00	
Full Name of Contributor Paul Bingle							Registration Number, if PAC		
Street Address 408 E Schreyer Place				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Paypal	
City Columbus		State OH		Zip Code 43214		M 1		D 0	
						Y 2		Amount \$50.00	
Full Name of Contributor Donald Peasley							Registration Number, if PAC		
Street Address 858 Lookout Pt Dr				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Paypal	
City Columbus		State OH		Zip Code 43235		M 1		D 0	
						Y 2		Amount \$100.00	
Full Name of Contributor Susan Elkins							Registration Number, if PAC		
Street Address 6456 Goldfinch Dr				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) Paypal	
City Westerville		State OH		Zip Code 43081		M 1		D 0	
						Y 2		Amount \$25.00	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	
Full Name of Contributor							Registration Number, if PAC		
Street Address				Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)	
City		State OH		Zip Code		M		D	
						Y		Amount	

* 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 **\$185.00**