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			Registration Number, if PAC	
Patricia Marcum				
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
284 S Stanwood Rd				Check
City	State	Zip Code 43209		Amount \$100.00
Bexley	OH	43209	0 9 1 4 0 9 Registration Number, if P	
Full Name of Contributor			Registration Number, if r	AC
Linda Jordan		*		Form (Cash, Check, etc.)
Street Address	Employer/Occupation/Labor Organization*			Check
4853 Glenburn Ave	State	Zip Code ·	M D Y	Amount
City Columbus	OH	43214	082109	\$25.00
Full Name of Contributor			Registration Number, if F	PAC
E. Michael Fliegel				
Street Address	Employer/Occu	pation/Labor Organization*		Form (Cash, Check, etc.)
1650 Pendennis Ct				Check
City	State	Zip Code	M D Y	Amount
Columbus	OH	43235	0 8 2 1 0 9	\$25.00
Full Name of Contributor			Registration Number, if I	PAC
Diann Stevens				
Street Address	Employer/Occi	ipation/Labor Organization*		Form (Cash, Check, etc.)
1640 Regents Hill Dr				Check
City	State	Zip Code 43223	0 8 2 1 0 9	Amount \$25.00
Columbus	OH	43223	Registration Number, if I	
Full Name of Contributor			Registration Number, in	TAC
Douglas Bailey		*		Form (Cash, Check, etc.)
Street Address	Employer/Occi	ipation/Labor Organization*		Check
4208 Mayfair Ct N	State	Zip Code	M D Y	Amount
City Grove City	OH	43123	0 8 2 1 0 9	\$25.00
Full Name of Contributor			Registration Number, if	PAC
Ryland H Mullins				
Street Address	Employer/Occi	upation/Labor Organization*		Form (Cash, Check, etc.)
1388 E Long St				Check
City	State	Zip Code	M D Y	Amount
Columbus	OH	43203	082109	\$25.00
Full Name of Contributor			Registration Number, if	PAC
Doris Calloway Moore				
Street Address	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.)
883 Schillingwood Dr				Check
City	State	Zip Code	0 B 2 1 0 9	Amount \$25.00
Gahanna	OH	43230	Registration Number, if	
Full Name of Contributor			regionation rumber, it	1110
Jack & Marilyn Donahue Street Address	Ir1	upation/Labor Organization*		Form (Cash, Check, etc.)
1012 Hardesty Place W	Employer/Occ	араноп/равот Огданіzацоп		Check
City	State	Zip Code	M D Y	Amount
Columbus	ОН	43204	0 8 2 1 0 9	\$100.00

Page Total \$350.00

^{*} 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)]