Statement of Contributions Received

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Prescribed by Secretary of State 03/05

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Name of Committee in Full Committee 4 Children				
Full Name of Contributor			Registration Number, if PAC	
Wayne M Lane				
Street Address 7319 Bridlespur Lane	Employer/Ocer	upation/Labor Organization	<u>L</u>	Form (Cash, Check, etc.) Check
City	State	Zip Code	- 1 1 1 1 N 1 V	
Delaware	OH	43015	0 7 1 7 1 4	Amount \$150.00
Full Name of Contributor	<u> </u>	'	Registration Number, if I	PAC
Golden & Meizlish Co., L.P.A.				
Street Address	Employer/Occupation/Labor Organization			Form (Cash, Check, etc.)
923 East Broad Street				Check
City	State	Zip Code	M D Y O 7 1 7 1 4	Amount
Columbus	OH	43205	071714	\$120.00
Full Name of Contributor			Registration Number, if F	PAC
Federation of Franklin County				-
Street Address	Employer/Occi	upation/Labor Organization		Form (Cash, Check, etc.)
PO Box 06617		-		Check
City	State	Zip Code	M D Y	Amount
Columbus	OH	43206	0 7 1 7 1 4	\$500.00
Full Name of Contributor		<u> </u>	Registration Number, if F	AC
James G Ryan				
Street Address	Employer/Occu	apation/Labor Organization		Form (Cash, Check, etc.)
237 E College Ave				Check
City	State	Zip Code	M, D, Y	Amount
Westerville	OH	43081	071714	\$50.00
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·	1	Registration Number, if P	PAC .
Robert J Weiler				
Street Address	Employer/Occu	ipation/Labor Organization		Form (Cash, Check, etc.)
10 N High St, STE 401				Check
City	State	Zip Code	M D Y	Атоши
Columbus	OH	43215	0 7 1 7 1 4	\$1,000.00
Full Name of Contributor			Registration Number, if P	'AC
Manuel J Asensio				
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)
2676 Brentwood Rd				Check
City	State	Zip Code	M D Y	Amount
Columbus	ОН	43209	071714	\$50.00
Full Name of Contributor	· · · · · · · · · · · · · · · · · · ·		Registration Number, if P	AC
Life Start, Inc				
Street Address	Employer/Occu	ipation/Labor Organization		Form (Cash, Check, etc.)
142 North High Street		Annual Title		Check
City	State	Zip Code	M D Y	Amount
Gahanna	OH	43230	071714	\$200.00
Full Name of Contributor	<u>'</u>		Registration Number, if P	AC
Beech Brook				
Street Address	Employer/Occu	pation/Labor Organization		Form (Cash, Check, etc.)
3737 Lander Road		F		Check
City	State	Zip Code	M D Y	Amount
Pepper Pike	OH	44124	0 7 1 7 1 4	\$600.00

Page Total \$2,670.00

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)]