

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children							
Full Name of Contributor Linda McKnight					Registration Number, if PAC		
Street Address 2199 Jarrow Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal		
City Hilliard	State OH	Zip Code 43026	M 0	D 7	Y 2	Amount \$50.00	
Full Name of Contributor Matthew Hersha					Registration Number, if PAC		
Street Address 3179 Dunlavin Glen Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal		
City Columbus	State OH	Zip Code 43221	M 0	D 7	Y 2	Amount \$2,000.00	
Full Name of Contributor Donald Van Meter					Registration Number, if PAC		
Street Address 530 Cardinal Hill Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal		
City Powell	State OH	Zip Code 43065	M 0	D 7	Y 1	Amount \$20.00	
Full Name of Contributor Tina Rutherford					Registration Number, if PAC		
Street Address 5825 Coneflower Drive		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal		
City Grove City	State OH	Zip Code 43123	M 0	D 7	Y 1	Amount \$500.00	
Full Name of Contributor Donald Van Meter					Registration Number, if PAC		
Street Address 530 Cardinal Hill Lane		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal		
City Powell	State OH	Zip Code 43065	M 0	D 7	Y 1	Amount \$20.00	
Full Name of Contributor Abdikhayr Soofe					Registration Number, if PAC		
Street Address 3297 Gatewood Court		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal		
City Columbus	State OH	Zip Code 43219	M 0	D 7	Y 1	Amount \$125.00	
Full Name of Contributor Carol Morrison					Registration Number, if PAC		
Street Address 15562 Davis Road		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal		
City Mount Sterling	State OH	Zip Code 43143	M 0	D 7	Y 2	Amount \$50.00	
Full Name of Contributor Linda Peters					Registration Number, if PAC		
Street Address 1271 Meadowlands Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Paypal		
City Fairborn	State OH	Zip Code 45324	M 0	D 7	Y 2	Amount \$100.00	

* 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)]