

# Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Committee 4 Children</b>							
Full Name of Contributor <b>Joy Ann Soll</b>						Registration Number, if PAC	
Street Address <b>141 S Drexel Ave</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Bexley</b>		State <b>OH</b>	Zip Code <b>43209</b>		M <b>0</b>	D <b>4</b>	Y <b>2 2 1 4</b>
						Amount <b>\$1,000.00</b>	
Full Name of Contributor <b>Elvin Cannon Jr</b>						Registration Number, if PAC	
Street Address <b>820 Bryden Rd</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43205</b>		M <b>0</b>	D <b>4</b>	Y <b>2 2 1 4</b>
						Amount <b>\$100.00</b>	
Full Name of Contributor <b>Kay B Marshall</b>						Registration Number, if PAC	
Street Address <b>288 Mimring Rd</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43202</b>		M <b>0</b>	D <b>4</b>	Y <b>2 4 1 4</b>
						Amount <b>\$100.00</b>	
Full Name of Contributor <b>Deborrha A Armstrong</b>						Registration Number, if PAC	
Street Address <b>7152 Calusa Dr</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Reynoldsburg</b>		State <b>OH</b>	Zip Code <b>43068</b>		M <b>0</b>	D <b>4</b>	Y <b>2 4 1 4</b>
						Amount <b>\$500.00</b>	
Full Name of Contributor <b>Yvette McGee Brown</b>						Registration Number, if PAC	
Street Address <b>643 Crossing Crk S</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Gahanna</b>		State <b>OH</b>	Zip Code <b>43230</b>		M <b>0</b>	D <b>4</b>	Y <b>2 4 1 4</b>
						Amount <b>\$2,500.00</b>	
Full Name of Contributor <b>Mubarak E Awad</b>						Registration Number, if PAC	
Street Address <b>7118 Cypress Hill Dr</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Gaithersburg</b>		State <b>MD</b>	Zip Code <b>20879</b>		M <b>0</b>	D <b>4</b>	Y <b>2 4 1 4</b>
						Amount <b>\$100.00</b>	
Full Name of Contributor <b>Charles K Milless</b>						Registration Number, if PAC	
Street Address <b>45 Salt Cedar Ln</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Kiawah Island</b>		State <b>SC</b>	Zip Code <b>29455</b>		M <b>0</b>	D <b>4</b>	Y <b>2 4 1 4</b>
						Amount <b>\$100.00</b>	
Full Name of Contributor <b>Denise Rehg</b>						Registration Number, if PAC	
Street Address <b>6006 Rock Rill Rd</b>			Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43235</b>		M <b>0</b>	D <b>4</b>	Y <b>2 4 1 4</b>
						Amount <b>\$150.00</b>	

\* 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)]