

# 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>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>8</b>	Y <b>0</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Kathleen P Murphy</b>				Registration Number, if PAC		
Street Address <b>2416 Southway Dr</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	M <b>0</b>	D <b>8</b>	Y <b>0</b>	Amount <b>\$250.00</b>
Full Name of Contributor <b>Sue Anne Goetz Doody</b>				Registration Number, if PAC		
Street Address <b>2155 Yorkshire Rd</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43221</b>	M <b>0</b>	D <b>8</b>	Y <b>0</b>	Amount <b>\$250.00</b>
Full Name of Contributor <b>Anne J Jeffrey</b>				Registration Number, if PAC		
Street Address <b>296 Ashbourne Pl</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>0</b>	D <b>8</b>	Y <b>0</b>	Amount <b>\$250.00</b>
Full Name of Contributor <b>The Daimler Group, Inc.</b>				Registration Number, if PAC		
Street Address <b>1533 Lake Shore Drive, STE 50</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43204</b>	M <b>0</b>	D <b>8</b>	Y <b>1</b>	Amount <b>\$5,000.00</b>
Full Name of Contributor <b>Janet E Jackson</b>				Registration Number, if PAC		
Street Address <b>2865 Castlewood Rd</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	M <b>0</b>	D <b>8</b>	Y <b>1</b>	Amount <b>\$250.00</b>
Full Name of Contributor <b>Legacy Maintenance Services, LLC</b>				Registration Number, if PAC		
Street Address <b>2475 Scioto Harper Drive</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43204</b>	M <b>0</b>	D <b>8</b>	Y <b>1</b>	Amount <b>\$200.00</b>
Full Name of Contributor <b>David R Meuse</b>				Registration Number, if PAC		
Street Address <b>191 West Nationwide Blvd, STE 600</b>		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	M <b>0</b>	D <b>8</b>	Y <b>1</b>	Amount <b>\$5,000.00</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)]