

## Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children						
Full Name of Contributor MJ Green				Registration Number, if PAC		
Street Address 155 W Main St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43215	M 0	D 9	Y 2	Amount \$500.00
Full Name of Contributor Stephanie L Tresso-Celebreeze				Registration Number, if PAC		
Street Address 368 W 2nd Ave		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43201	M 0	D 9	Y 2	Amount \$75.00
Full Name of Contributor Erika C Jones				Registration Number, if PAC		
Street Address 63 S Harding Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43209	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor Sarah D Levels				Registration Number, if PAC		
Street Address 2567 Ashley Meadow Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43219	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor Sylvia Kendrick				Registration Number, if PAC		
Street Address 6702 Red Sunset Pl		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43213	M 0	D 9	Y 2	Amount \$100.00
Full Name of Contributor Donatos				Registration Number, if PAC		
Street Address 935 Taylor Station Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43230	M 0	D 9	Y 2	Amount \$250.00
Full Name of Contributor Carried the Bag, LLC				Registration Number, if PAC		
Street Address 4449 Easton Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43219	M 0	D 9	Y 2	Amount \$75.00
Full Name of Contributor Choice Network Inc.				Registration Number, if PAC		
Street Address 1258 Grandview Ave, STE B		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43212	M 0	D 9	Y 2	Amount \$150.00

\* 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)]