

# 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>Mary T Day</b>						Registration Number, if PAC			
Street Address <b>516 Portland Way South</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Galion</b>		State <b>OH</b>		Zip Code <b>44833</b>		M <b>0</b>		D <b>9</b>	
						Y <b>0</b>		Y <b>4</b>	
						Amount <b>\$600.00</b>			
Full Name of Contributor <b>Jennifer L Reinheimer</b>						Registration Number, if PAC			
Street Address <b>7731 Polo Ln</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Powell</b>		State <b>OH</b>		Zip Code <b>43065</b>		M <b>0</b>		D <b>9</b>	
						Y <b>0</b>		Y <b>4</b>	
						Amount <b>\$100.00</b>			
Full Name of Contributor <b>Timothy T Oneil</b>						Registration Number, if PAC			
Street Address <b>4492 Cliff Ridge Dr</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Columbus</b>		State <b>OH</b>		Zip Code <b>43230</b>		M <b>0</b>		D <b>9</b>	
						Y <b>0</b>		Y <b>4</b>	
						Amount <b>\$50.00</b>			
Full Name of Contributor <b>Tina N Murphy</b>						Registration Number, if PAC			
Street Address <b>1172 Somers St</b>			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.) <b>Check</b>		
City <b>Zanesville</b>		State <b>OH</b>		Zip Code <b>43701</b>		M <b>0</b>		D <b>9</b>	
						Y <b>0</b>		Y <b>4</b>	
						Amount <b>\$200.00</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.) <b>Check</b>		
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>		Y <b>2</b>	
						Amount <b>\$5,000.00</b>			
Full Name of Contributor						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization*				Form (Cash, Check, etc.)		
City		State		Zip Code		M		D	
		<b>OH</b>				Y		Y	
						Amount			
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.) <b>Check</b>		
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>		Y <b>2</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.) <b>Check</b>		
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>		Y <b>2</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)]