

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children						
Full Name of Contributor Paul D Marshall				Registration Number, if PAC		
Street Address 288 Mimring Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43202	M 1	D 0	Y 2	Amount \$50.00
Full Name of Contributor Laurie J Lawhon				Registration Number, if PAC		
Street Address 2238 Shrewsbury Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43221	M 1	D 0	Y 2	Amount \$30.00
Full Name of Contributor Necol Russell-Washington				Registration Number, if PAC		
Street Address 8067 Harvestmoon Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State OH	Zip Code 43068	M 1	D 0	Y 2	Amount \$50.00
Full Name of Contributor Judy K Murray				Registration Number, if PAC		
Street Address 13347 Sandover PI NW		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Pickerington	State OH	Zip Code 43147	M 1	D 0	Y 2	Amount \$50.00
Full Name of Contributor Marilyn Donahue				Registration Number, if PAC		
Street Address 1012 Hardesty Place W		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43204	M 1	D 0	Y 2	Amount \$100.00
Full Name of Contributor Deborrha A Armstrong				Registration Number, if PAC		
Street Address 7152 Calusa Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Reynoldsburg	State OH	Zip Code 43068	M 1	D 0	Y 2	Amount \$25.00
Full Name of Contributor Doris Calloway Moore				Registration Number, if PAC		
Street Address 883 Schillingwood Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Gahanna	State OH	Zip Code 43230	M 1	D 0	Y 2	Amount \$25.00
Full Name of Contributor Helen D Wiley				Registration Number, if PAC		
Street Address 5495 Aqua Street		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check	
City Columbus	State OH	Zip Code 43229	M 1	D 0	Y 2	Amount \$50.00

* 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)]