

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children						
Full Name of Contributor Michelle C Stratman				Registration Number, if PAC		
Street Address 2249 Edgevale Rd		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43221	M 0	D 7	Y 1	Amount \$50.00
Full Name of Contributor Stephen F Richard				Registration Number, if PAC		
Street Address 1818 Chimney Hill Ct		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Reynoldsburg	State OH	Zip Code 43068	M 0	D 7	Y 1	Amount \$50.00
Full Name of Contributor Kimberly E Miller				Registration Number, if PAC		
Street Address 8730 Swisher Creek Xing		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City New Alban	State OH	Zip Code 43054	M 0	D 7	Y 1	Amount \$100.00
Full Name of Contributor D Nicholas Rees				Registration Number, if PAC		
Street Address 307 Hampton Park		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Westerville	State OH	Zip Code 43081	M 0	D 7	Y 1	Amount \$100.00
Full Name of Contributor Gary R Stammler				Registration Number, if PAC		
Street Address 59 Trine St		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Canal Winchester	State OH	Zip Code 43110	M 0	D 7	Y 1	Amount \$50.00
Full Name of Contributor Roger Minner				Registration Number, if PAC		
Street Address 294 Stewart Avenue		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43206	M 0	D 7	Y 1	Amount \$50.00
Full Name of Contributor Sehul Patel				Registration Number, if PAC		
Street Address 3429 Pine Way		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Powell	State OH	Zip Code 43065	M 0	D 7	Y 1	Amount \$50.00
Full Name of Contributor Pamela Scott				Registration Number, if PAC		
Street Address 1288 Fowler Dr		Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) Check	
City Columbus	State OH	Zip Code 43224	M 0	D 7	Y 1	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)]