Statement of Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Committee 4 Children				
Full Name of Contributor Teresa A Mitchell			Registration Number, if PAC	
Street Address 215 Rugby Lane	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Gahann	State OH	Zip Code 43230	1 0 2 0 0 9	Amount \$5.00
Full Name of Contributor Linda Brancato	Registration Number, if PAC			
Street Address 8234 Glencrest Drive	Employer/Occupa	Employer/Occupation/Labor Organization*		Form (Cash, Check, etc.) check
City Reynoldsburg	State OH	Zip Code 43068	1 0 2 0 0 9	Amount \$40.00
ull Name of Contributor Registration Numbe Kelly Hartmann			Registration Number, if P	
Street Address 6311 Hiltop Ave	Employer/Occupa	ntion/Labor Organization*		Form (Cash, Check, etc.) check
City Reynoldsburg	State OH	Zip Code 43068	1 0 2 0 0 9	Amount \$10.00
Full Name of Contributor Kathy S Bruner Registration Number, if I				AC
Street Address 6425 Jackson Pike	Employer/Occupa	ation/Labor Organization*	100000000000000000000000000000000000000	Form (Cash, Check, etc.) check
City Grove City	State OH	Zip Code 43123	1 0 2 0 0 9	Amount \$20.00
Full Name of Contributor Registration Beth Ann Earl				AC
Street Address 1990 Lamont Ave	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43224	1 0 2 0 0 9	Amount \$20.00
Full Name of Contributor Registration Number, Gwen Thomas				AC
Street Address 2924 Heath Ct	Employer/Occupation/Labor Organization*			Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43232	1 0 2 0 0 9	Amount \$5.00
Full Name of Contributor Registration Number, if PAC Theresa Weddington				AC
Street Address 1316 Simpson Dr	Employer/Occupa	ation/Labor Organization*		Form (Cash, Check, etc.) check
City Columbus	State OH	Zip Code 43227	M D Y 1 D 9	Amount \$25.00
Full Name of Contributor Fundraising Cash Registration Number, if PAC				
Street Address	Employer/Occupa	Employer/Occupation/Labor Organization*		
City	State OH	Zip Code	M D Y 1 0 2 0 0 9	Amount \$175.00

Page Total \$300.00

^{*} 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)]