

# 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>Katherine Schwarz</b>						Registration Number, if PAC			
Street Address <b>3127 Walden Ravines</b>			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Columbus</b>		State <b>OH</b>	Zip Code <b>43221</b>		M <b>0</b>	D <b>8</b>	Y <b>2</b>	Y <b>1</b>	Amount <b>\$100.00</b>
Full Name of Contributor <b>Heather Saling</b>						Registration Number, if PAC			
Street Address <b>5589 Morgan Court</b>			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Groveport</b>		State <b>OH</b>	Zip Code <b>43125</b>		M <b>0</b>	D <b>8</b>	Y <b>2</b>	Y <b>8</b>	Amount <b>\$500.00</b>
Full Name of Contributor <b>Henry Martinez</b>						Registration Number, if PAC			
Street Address <b>2656 Sawmill Meadows</b>			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Dublin</b>		State <b>OH</b>	Zip Code <b>43016</b>		M <b>0</b>	D <b>8</b>	Y <b>2</b>	Y <b>8</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>Deborra Armstrong</b>						Registration Number, if PAC			
Street Address <b>7152 Calusa Dr</b>			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Reynoldsburg</b>		State <b>OH</b>	Zip Code <b>43068</b>		M <b>0</b>	D <b>8</b>	Y <b>2</b>	Y <b>8</b>	Amount <b>\$300.00</b>
Full Name of Contributor <b>Cathy Reeves</b>						Registration Number, if PAC			
Street Address <b>3424 Red Cedar Ct</b>			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Grove City</b>		State <b>OH</b>	Zip Code <b>43123</b>		M <b>0</b>	D <b>8</b>	Y <b>2</b>	Y <b>8</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>Paula Kuzelka</b>						Registration Number, if PAC			
Street Address <b>74 Front Street</b>			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Commercial Point</b>		State <b>OH</b>	Zip Code <b>43116</b>		M <b>0</b>	D <b>9</b>	Y <b>0</b>	Y <b>2</b>	Amount <b>\$50.00</b>
Full Name of Contributor <b>United Methodist Children's Home</b>						Registration Number, if PAC			
Street Address <b>1033 High Street</b>			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Check</b>			
City <b>Worthington</b>		State <b>OH</b>	Zip Code <b>43085</b>		M <b>0</b>	D <b>9</b>	Y <b>0</b>	Y <b>2</b>	Amount <b>\$3,000.00</b>
Full Name of Contributor <b>Caregivers Helpers</b>						Registration Number, if PAC			
Street Address			Employer/Occupation/Labor Organization *			Form (Cash, Check, etc.) <b>Cashiers Check</b>			
City <b>Columbus</b>		State <b>OH</b>	Zip Code		M <b>0</b>	D <b>9</b>	Y <b>0</b>	Y <b>2</b>	Amount <b>\$1,000.00</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)]

Page Total **\$5,050.00**