FOR PAPER FILING ONLY In-Kind Contributions Received

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Prescribed by Secretary of State 03/0:

Name of Committee in Full			
Citizens to Re-Elect Amy Salay			
Full Name of Contributar Amy Salay	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item or Service		M D Y Fair Market Value
5789 Gaelic Ct	Re-Election Signs (Previously used)		1 0 0 5 1 3 \$275.00
City Dublin	OH SEE IE	Zip Code 43016	Roceived at Fundraising Event? OYES O NO
Full Name of Commbutor	Employer, Occup	ation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item or Service		M D Y Fair Market Value
Ciry	State	Zrp Code	Received at Fundraising Event?
	ОН		1_
Full Name of Contributor		rtion, Labor Organization*	Q YES O NO Registration Number, if PAC
a minimum of continue	enduniar occuba	com' cases established.	Registration Number, II FAC
Street Address	Description of Item	o or Service	M D Y Fair Market Value
City	Sta in	Zip Code	Received at Fundraising Event?
	OH		OYES O NO
Full Name of Contributor	Employer Occurs	tion, Labor Organization*	Registration Number, if PAC
	, , , , , , , ,		,
Street Address	Description of Iten	or Service	M D Y Fair Market Value
City	State	Zip Code	Received at Fundraising Event?
	OH		OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item or Service		M D Y Fair Market Value
Ciry	Sta te	Zip Code	Received at Fundraising Event?
chy	OH	Zq. Case	_
	1	<u> </u>	OYES ONO
Full Name of Contributor	Employer, Occupa	ation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item	a or Scrvice	M D Y Fair Market Value
City	State	Zip Code	Received at Fundraising Event?
•	ОН	1	1_ 1
Full Name of Contributor	<u> </u>	arion, Labor Organization*	O YES O NO Registration Number, if PAC
Full Valle of Controlling	Employer, Occup	and, cases organization	Regnession Names, ir FAC
Street Address	Description of Item	n or Service	M D Y Fair Market Value
City	Stai, tc OH	Zip Code	Received at Fundraising Event? OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item or Service		M. D. Y. Fair Market Value
City	State:	Zip Code	Received at Fundraising Event?
	ОН		Oyes O NO

\$ 275.00

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. It contributor is self-employed, the occupation and 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)]