

# In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Rachael Dorothy</b>				
Full Name of Contributor <b>Jodi Barnhill</b>		Employer, Occupation, Labor Organization* <b>Mercury Design Studios</b>		Registration Number, if PAC
Street Address <b>175 Kenbrook Drive</b>		Description of Item or Service <b>Graphic Design--Door Hangers</b>		M   D   Y   Fair Market Value <b>0 7 2 0 1 7   \$1,000.00</b>
City <b>Worthington</b>		Sta te <b>OH</b>	Zip Code <b>43085</b>	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO
Full Name of Contributor <b>Citizens for Daley</b>		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address <b>852 Highview Drive</b>		Description of Item or Service <b>Fab 4 Fliers</b>		M   D   Y   Fair Market Value <b>0 7 0 9 1 7   \$74.98</b>
City <b>Columbus</b>		Sta te <b>OH</b>	Zip Code <b>43235</b>	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO
Full Name of Contributor <b>Citizens for Daley</b>		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address <b>852 Highview Drive</b>		Description of Item or Service <b>Fab 4 Fliers</b>		M   D   Y   Fair Market Value <b>0 9 2 4 1 7   \$112.07</b>
City <b>Columbus</b>		Sta te <b>OH</b>	Zip Code <b>43235</b>	Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> 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		Sta te <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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		Sta te <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO
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City		Sta te <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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		Sta te <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If 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)]