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## **In-Kind Contributions Received**

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Friends of Anthony Paletta								
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC					
Anthony Paletta			<u> </u>					
Street Address	Description of Item or Service		M	D	Y	Fair Market Value		
255 W Kanawha Ave	Business Cards (Qty. 1000)		018				52.74	
City	State	Zip Code	Received	at Fundr	aising E			
Columbus	$O \mid H$	43214	<u>  []</u> `	YES		√J×o		
Full Name of Contributor	Employer, Occup	ation. Labor Organization *	Registratio	on Numl	er, if PA	NC .		
Anthony Paletta								
Street Address	Description of Item or Service		M	D	Y	Fair Market Value		
255 W Kanawha Ave	Door Hangers (Qty. 1000)		019	013	115	Ì	181.68	
City	State	Zip Code	Received	at Fundr	aising E	vent?		
Columbus	lo I H	43214	□ <sup>,</sup>	YES		√No		
Full Name of Contributor	Employer, Occup	oation. Labor Organization *	Registration	Registration Number, if PAC				
Lori Gerald			1					
Street Address	Description of Ite	em or Service	M	D	Y	Fair Market Value		
449 Rosslyn Ave	orthingtor	n Town Saver Oct.	110	0 1	115		240.00	
City	State	Zip Code	Received	at Fundi				
Columbus	O   H	43214	_	YES		✓No		
Full Name of Contributor		oation. Labor Organization *	Registrati	on Num	ber, if PA	AC		
		-	'					
Street Address	Description of Item or Service			D	Y	Fair Market Value		
	-			1				
City	State	Zip Code	Received	at Fundi	aising E	vent?		
<b>'</b>	1 1			YES		∏so		
Full Name of Contributor	Employer, Occup	oation. Labor Organization *	Registrati	on Numi	ber, if P	AC		
			1					
Street Address	Description of Item or Service		М	D	Y	Fair Market Value		
			1 1 1			İ		
City	State	Zip Code	Received	at Fundi	aising E	vent <sup>9</sup>	-	
				YES		□NO		
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC					
]								
Street Address	Description of Item or Service		М	Đ	Ϋ́	Fair Market Value		
			1 1 1		<b> </b>	1		
City	State	Zip Code	Received	at Fundi	aising E	veni?		
<i>'</i>	1			YES		□NO		
Full Name of Contributor	Employer, Occup	oation, Labor Organization *	Registrati	on Num	ber, if Pa	AC .		
Street Address	Description of Item or Service		М	D	Y	Fair Market Value		
			1 1 1	- 1	<b>!</b>	1		
City	State	Zip Code	Received	at Fundi	aising E	vent?		
C.L.y	1			YES	_	□so		
Full Name of Contributor	Employer, Occupation. Labor Organization *		Registration Number, if PAC					
	' '	·	-					
Street Address	Description of Item or Service		М	D	Ÿ	Fair Market Value		
1			1	- 1	1			
City	State	Zip Code	Received	at Fundi	aising E	vent?		
	l l		_	YES	_	□zo		

Page Total \$	474.42
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<sup>\*</sup> 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 appear. {R.C. 3517.10(B)(4)}