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In-Kind Contributions Received

Form 31-J-1 R.C. 3517.10

Full Name of Committee	125 416-218					
Groveport Madison Committee for Bette	r Schools					
Full Name of Contributor		Employer, Occup	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Todd Gray						
Street Address	Description of Item	or Service	or Service		Fair Market Value	
3980 Hendron Ct	refreshments for campaign events		04/13/2019	108.58		
City	State	Zip Code	Received at Fundraisi	ng Event?		
Groveport	ОН	43125	☐ Yes 🗵 No			
Full Name of Contributor	, <u></u>	Employer, Occup	pation, Labor Organization*	Registration Number,	if PAC	
Street Address	Description of Item	n or Ser <i>v</i> ice	Service Date (MM/DD/YYYY)		Fair Market Value	
City	State	Zip Code	Received at Fundraisi	ng Event?		
Full Name of Contributor Employer, Occupation, Labor Organize		oation, Labor Organization*	* Registration Number, if PAC			
Street Address	Description of Item	n or Service	Service Date (MM/DD/YYYY) Fair Market Value			
City	State	Zip Code	Received at Fundraisi	ng Event?		
Full Name of Contributor		Employer, Occup	pation, Labor Organization*	Registration Number, if PAC		
Street Address	Description of Item	scription of Item or Service Date (MM/DD/YYYY) Fair Market		Fair Market Value		
City	State	Zip Code	Received at Fundraisi	ng Event?		
Full Name of Contributor		Emp.cyer, Occup	Emp.cyer, Occupation, Labor Organization* Registratio		ration Number, if PAC	
Street Address	Description of Item	n ar Service	Service Date (MM/DD/YYYY) Fair M		Fair Market Value	
City	State	Zip Cade	Received at Fundraisi			

* 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 a splappear. [R.C. 3517.10(B)(4)]

	108.58
Page Total \$	