

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full CITIZENS FOR CARRIER				
Full Name of Contributor FRANK CARRIER, JR.		Employer, Occupation, Labor Organization * EPS CONSULTANT		Registration Number, if PAC
Street Address 4394 SHIRE CREEK CT		Description of Item or Service SUPPLIES/ELECT PARTY		M D Y Fair Market Value 015 016 113 145.56
City HILLIARD		State OH	Zip Code 43026	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor FRANK CARRIER, JR.		Employer, Occupation, Labor Organization * EPS CONSULTANT		Registration Number, if PAC
Street Address 4394 SHIRE CREEK CT		Description of Item or Service SUPPLIES/ELECT PARTY		M D Y Fair Market Value 15 017 113 92.23
City HILLIARD		State OH	Zip Code 43026	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor		Employer, Occupation, Labor Organization *		Registration Number, if PAC
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Street Address		Description of Item or Service		M D Y Fair Market Value
City		State	Zip Code	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO

* 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)]

Page Total \$ 237.79