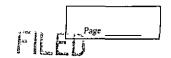
## **In-Kind Contributions Received**



	of State 03/05	12 MAR 25 PM 12: 01				
Name of Committee in Full Geraley for Gahana			FRA	MKLIN	LOOUNTV	
Full Name of Conglutor J Tol Geraley	Employer, Occupat	tion, Labor Organization*	<b>哈</b> 曼纳州	ofi)Number,[	ELECTIONS	
Street Address 109 Shepard St. Apt. A	Description of Item or Service  Cash		M D Y Fair Market Value 475.19			
Gahana	State O/H	12ip Code 143730	□ YES	at Fundraisi	NO NO	
Full Name of Contributor	Employer, Occupat	tion, Labor Organization*	Registratio	on Number,	if PAC	
Street Address	Description of Item	or Service	8/		Fair Market Value	
City	Sta te	Zip Code	Received:	at Fundraisi	ng Event?	
Full Name of Contributor	Employer, Occupat	tion! Labor Organization*		on Number,		
Street Address	Description of Item or Service		Mo	1 8/1	Fair Market Value	
City	Sta te	Zip Code	Received a	at Fundraisi	ng Event?	
Full Name of Contributor	Employer, Occupat	tion, Labor Organization*		on Number,		
Street Address	Description of Item	or Service	MO	P //	Fair Market Value	
City	Sta te	Zip Code	Received a	at Fundraisi	ng Event?	
Full Name of Contributor	Employer, Occupat	tion, Labor Organization*		on Number,	ifPAC	
Street Address	Description of Item or Service		M	02/1	Fair Market Value	
City	Sta te	Zip Code	Received a	at Fundraisir	ng Event?	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC			
Street Address	Description of Item	or Service	M		Fair Market Value	
City	Sta te	Zip Code	Received a	at Fundraisi	ng Event?	
Full Name of Contributor	Employer, Occupat	tion, Labor Organization*	Registratio	on Number,	if PAC	
Street Address	Description of Item	or Service	M	D Y	Fair Market Value	
City	Sta te Zip Code		Received at Fundraising Event?			
Full Name of Contributor	Employer, Occupat	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address	Description of Item or Service		M	D Y	Fair Market Value	
City	Sta te	Zip Code	Received :	at Fundraísia	ng Event?	

Page Total \$ 969.19

<sup>\*</sup> 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)]