

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

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Page

12 MAR 25 PM 12:01

Name of Committee in Full		Employer, Occupation, Labor Organization*		Registration Number, if PAC	Fair Market Value
Gergley for Gahanna		Lowes		071411	475.19
Full Name of Contributor Joe Gergley		Description of Item or Service Cash		Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Street Address 109 Shepard St. Apt. A		State OH		Zip Code 43230	
City Gahanna					
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC	Fair Market Value
Street Address		Description of Item or Service		8/1/11	150
City		State		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	Fair Market Value
Street Address		Description of Item or Service		10/18/11	122
City		State		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	Fair Market Value
Street Address		Description of Item or Service		11/03/11	110
City		State		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	Fair Market Value
Street Address		Description of Item or Service		11/02/11	12
City		State		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	Fair Market Value
Street Address		Description of Item or Service		11/07/11	100
City		State		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	Fair Market Value
Street Address		Description of Item or Service			
City		State		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC	Fair Market Value
Street Address		Description of Item or Service			
City		State		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 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)]

Page Total \$

969.19