

# In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <b>Citizens for Hawk</b>			
Full Name of Contributor <b>Dan LeVesque</b>	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address <b>1453 Ironwood D</b>	Description of Item or Service <b>Food &amp; Beverage; 3/4 Event</b>		M   D   Y   Fair Market Value <b>0   3   0   4   1   6   \$325.10</b>
City <b>Grove City</b>	State <b>OH</b>	Zip Code <b>43123</b>	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> 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 <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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 <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC
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City	State <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO
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City	State <b>OH</b>	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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 **\$325.10**