



## **In-Kind Contributions Received**

Form 31-J-1 R.C. 3517.10

Full Name of Committee						
Yes We Can Columbus						
Full Name of Contributor	Employer, Occu	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Will Petrik for Columbus						
Street Address Description of Item of		Item or Service		Date (MM/DD/YYYY)	Fair Market Value	
2221 Myrtle Ave	Mailers			10/18/2017	795.73	
City	State		Received at Fundraisi	ing Event?		
olumbus		43211	☐ Yes ⊠ No			
Full Name of Contributor		Employer, Occu	pation, Labor Organization*	on, Labor Organization* Registration Number, if PAC		
Street Address Descrip		tion of Item or Service		Date (MM/DD/YYYY)	Fair Market Value	
City	State	Zip Code	Zip Code Received at Fundraising Event?		l	
	ОН	ĺ				
Full Name of Contributor		Employer, Occu	pation, Labor Organization*	Registration Number,	if PAC	
Street Address	Description of	Description of Item or Service		Date (MM/DD/YYYY)	Fair Market Value	
City	State	Zip Code	Zip Code Received at Fundraising		L	
ОН			☐ Yes ☐ No			
Full Name of Contributor		Employer, Occu	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address Description of Hern		Item or Service	or Service		Fair Market Value	
City State OH		Zip Code	Zip Code Received at Fundraising Event?		<u> </u>	
			☐ Yes ☐ No			
Full Name of Contributor		Employer, Occu	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of	Item or Service	Service		Fair Market Value	
ity State		Zip Code	Received at Fundrais	sing Event?		
	ОН		☐ Yes ☐ No	☐ Yes ☐ No		
City		Zip Code		Received at Fundraising Event?  Yes No  dates. If contributor is self-employed, the occupation and nes contribute via payroll deduction and exceed the aggregation.		