Dono	5	
rage	<u> </u>	

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

V 40 1 2 7 1			
Name of Committee in Full			
Citizens for a Strong Gahanna			
Full Name of Contributor	Employer, Occup	oation, Labor Organization *	Registration Number, if PAC
Citizens for Jollev	<u> </u>		<u> </u>
Street Address	Description of Item or Service		M D Y Fair Market Value
187 Regents Rd		Postage	0 4 1 7 1 3 75.44
City	State	Zip Code	Received at Fundraising Event?
Gahanna	0.1 H	43230	□ YES ☑ 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?
Cuy	Sizie	ZIP Code	YES NO
rny co. a	<u> </u>	<u> </u>	<u>. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</u>
Full Name of Contributor	Employer, Occup	ation, Labor Organization *	Registration Number, if PAC
Street Address	Description of Ite	m or Service	M D Y Fair Market Value
City	- Contract	Trin Code	Received at Fundraising Event?
jený Pený	State	Zip Code	YES NO
T III 1	<u> </u>	<u> </u>	
Full Name of Contributor	Employer, Occup	ation, Labor Organization *	Registration Number, if PAC
Street Address	Description of Ite	m or Service	M D Y Fair Market Value
City	State	Zip Code	Received at Fundraising Event?
			YES NO
Full Name of Contributor	Employer, Occup	ation, 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?
on,	1		NES NO
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC
tan ivane or controdor			registration (value), if the
Street Address	Description of Item or Service		M D Y Fair Market Value
Street Address			I I I I I I I I I I I I I I I I I I I
Cim.	State	Tin Code	Received at Fundraising Event?
City	Sizie	Zip Code	YES NO
7 11 X		1	
Full Name of Contributor	Employer, Occup	ation, Labor Organization *	Registration Number, if PAC
Street Address	Description of Item or Service		M D Y Fair Market Value
			1 1 1
City	State	Zip Code	Received at Fundraising Event?
	1 1	,	YES NG
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC
Shan Address	December of the		M D Y Fair Market Value
Street Address	Description of Item or Service		
City	State	Zip Code	Received at Fundraising Event?
	1	<u> </u>	YES NO

Page Total \$	75.44

^{*} 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)]