



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee Shook For Reynoldsburg				
Full Name of Contributor Kristin J. Bryant		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 387 Cheyenne Way	Description of Item or Service Food and Drinks		Date (MM/DD/YYYY) 9/25/2019	Fair Market Value \$64.50
City Reynoldsburg	State OH <input type="checkbox"/>	Zip Code 43068	Received at Fundraising Event? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Full Name of Contributor Chris Shook		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 572 Hunnicut Dr.	Description of Item or Service Labels (Office Depot)		Date (MM/DD/YYYY) 10/9/2019	Fair Market Value \$10.75
City Reynoldsburg	State OH <input type="checkbox"/>	Zip Code 43068	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Chris Shook		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 572 Hunnicut Dr.	Description of Item or Service Social media advertising (Facebook)		Date (MM/DD/YYYY) 10/13/2019	Fair Market Value \$50.00
City Reynoldsburg	State OH <input type="checkbox"/>	Zip Code 43068	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
Street Address	Description of Item or Service		Date (MM/DD/YYYY)	Fair Market Value
City	State OH <input type="checkbox"/>	Zip Code	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
Street Address	Description of Item or Service		Date (MM/DD/YYYY)	Fair Market Value
City	State OH <input type="checkbox"/>	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" 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)]