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In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Robin Starrett for SWCS School Board				
Full Name of Contributor	Employer Occupa	tion, Labor Organization*	Registration Number, if PAC	
Robin Starrett	Employer, Occupa	gion, Labor Organization	registration runner, it trie	
Street Address	Description of Item	or Service	M D Y Fair Market Value	
4335 Waterside Place	Ohio Ethics Disclosure Filing		1 0 0 2 0 9 \$20.00	
City Grove City	State OH	Zip Code 43123	Received at Fundraising Event? OYES NO	
Full Name of Contributor	Employer Occupa	tion, Labor Organization*	Registration Number, if PAC	
Robin Starrett	Zinpioyon, occupa			
Street Address	Description of Item or Service		M D Y Fair Market Value	
4335 Waterside Place	YAHOO Web Page for Campaign		1 0 3 0 0 9 \$29.86	
City	Sta te	Zip Code	Received at Fundraising Event?	
Grove City	ОН	43123	YES O 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 OH	Zip Code	Received at Fundraising Event? O YES NO	
Full Name of Contributor	Employer, Occupa	tion, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item	a or Service	M D Y Fair Market Value	
City	State OH	Zip Code	Received at Fundraising Event? OYES NO	
Full Name of Contributor	Employer, Occupa	tion, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service		M D Y Fair Market Value	
City	Starte OH	Zip Code	Received at Fundraising Event?	
C. IDV	1	tion, Labor Organization*	OYES ONO Registration Number, if PAC	
Full Name of Contributor	Employer, Occupa	non, Labor Organization	Registration Number, it IAC	
Street Address	Description of Item	or Service	M D Y Fair Market Value	
City	Stal te OH	Zip Code	Received at Fundraising Event? O YES O NO	
Full Name of Contributor	Employer, Occupa	tion, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service		M D Y Fair Market Value	
City	Sta te OH	Zip Code	Received at Fundraising Event? OYES 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	Sta te	Zip Code	Received at Fundraising Event? OYES NO	

Page Total \$49.86

^{*} 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)]