



## **In-Kind Contributions Received**

Form 31-J-1 R.C. 3517.10

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Full Name of Committee		0.1	۸.	wil					
Friends of Anth									
Full Name of Contributor							Registration Number, i	1 40	
Bridgette Topes				RT Advisors					
reet Address Description of Item or S							Date (MM/DD/YYYY)		
220 E. Town Street	Fundraiser			- Exp				103.41	
City		State		Zip Code		Received at Fundraisin	ng Event?		
Columbus		6H	لسينا	4321					
Full Name of Contributor				Employer, Occupation, Labor Organization* Franklin County			Registration Number, i	f PAC	
Monica Moran				Auditor					
Street Address Description of Item or S			Service			Date (MM/DD/YYYY)			
1109 Challis Springs	Copcal			Kes			8-8-19	28.48	
City		State		Zip Code		Received at Fundraisi	ng Event?		
New & Albany		Otl		4305	4	Yes No			
Full Name of Contributor				Employer, Occupation, Labor Organization* Franklin County			Registration Number,	if PAC	
Monica Moran				Auditor					
Street Address	Description of them or						Date (MM/DD/YYYY)	Fair Market Value	
1109 Challis Springs	Fundraiser			Expenses			8-8-19	100.00	
City	<u> </u>	State		Zip Code		Received at Fundrais	ing Event?		
New Albany		OH		4BIZI	<b>28</b>	✓Yes □ No			
Full Name of Contributor				Employer, Occupation, Labor Organization*			Registration Number, if PAC		
Arueh Alex				Ohio Environmental					
Street Address Description of Item or			m or S				Date (MM/DD/YYYY)	Fair Market Value	
1952 Harrisburg Pike	FACEBOO			_			6-29-19	\$10	
City PINE	1 11	State		Zip Code		Received at Fundrais	ing Event?		
Grave City		OH	-	431	23	☐ Yes ☑ No			
Full Name of Contributor				Employer, Occupation, Labor Organization*			Registration Number, if PAC		
an ranto di Continuato.									
Street Address	Description of Item or			Service			Date (MM/DD/YYYY)	Fair Market Value	
- Carott, 1461-545									
City		State		Zip Code		Received at Fundraising Event?			
1 1			-			Yes No	Yes No		
		<u></u>		<u> </u>					

Page Total \$	241.89

<sup>\*</sup> 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)]