31-	J-1
R.C.	3517.10

In-Kind Contributions Received

	A.	
Dage		
Page		

Prescribed by Secretary of State 03/05

Name of Committee in Full MEGRADY FOR REYNOLDSBURG COUNCIL AT-LARGE							
MEGRADY FOR KEYNOLD	SBURG	COUNCIL-AT.	- LARGE				
Full Name of Contributor	Employer, Occupat	tion, Labor Organization*	Registration Number, it	t PAC			
CORNELIUS MEGRADY III	Description of Item	KED	Mi Inc. 1 se	Fair Market Value			
Street Address 8/26 Vinicelta / DR			19020	9 1012 11			
City	State	Zip Code	Received at Fundraisin	g Event?			
REYNOLDSBURG	OH	43068	O YES) NO			
Full Name of Contributor	Employer, Occupa	ation, Labor Organization*	Registration Number, i	1 PAC			
CONNIE METERADY	KEII,	TEU OF SERVICE	1 M: 1 70 1 00	Fair Market Value			
Street Address 8675 KINGSLEY DR	Description of Item	LATE FAYORS	10090	9 167,00			
City EYNOLDS BURG	State OH	Zip Code 43068	Received at Fundraisin	ng Event?			
Full Name of Contributor		ation, Kabor Organization*	Registration Number, i				
Street Address	Description of Item		M D Y				
City	Sta; te	Zip Code	Received at Fundraisin				
	OH Conver	Son Labor On the State of the S	Registration Number, i	NO NO			
Full Name of Contributor		ation, Labor Organization*					
Street Address	Description of Item		M D Y				
City	State OH	Zip Code	Received at Fundraisir	ng Event?			
Full Name of Contributor		ation, Labor Organization*	Registration Number,				
Street Address	Description of Iten	Description of Item or Service		Fair Market Value			
City	Staite OH	Zip Code	Received at Fundraisin	_			
		ation, Labor Organization*	YES Registration Number,	NO NO If PAC			
Full Name of Contributor							
Street Address	Description of Iten	m or Service	M D Y				
City	Stai te OH	Zip Code	Received at Fundraisin	_			
Full Name of Contributor	1	ation, Labor Organization*	Registration Number,	NO if PAC			
I MI I VAIN OF CONTROLLOU		0					
Street Address	Description of Iter	m or Service	M D Y				
City	Starte OH	Zip Code	Received at Fundraising Event? O YES NO				
Full Name of Contributor		Employer, Occupation, Labor Organization* Registration Number, if PAC					
Street Address	Description of Iter	m or Service		Fair Market Value			
City	Sta te	Zip Code	Received at Fundraisi				
	OH		OYES	0 ио			

Page Total

^{*} 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)]