In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full		
Name of Committee in Full CITIZENS SUPPORTING WHITEHALL SCHOOLS		
Full Name of Contributor	Employer, Occupation, Labor Organizati	on * Registration Number, if PAC
KEVER INCORPORATED		
Street Address	Description of Item or Service	M D Y Fair Market Value
4581 POTH ROAD	PRINTING	0 6 2 2 1 8 63.21
City	State Zip Code	Received at Fundraising Event?
WHITEHALL	O H 43213	UYES ✓NO
Full Name of Contributor	Employer, Occupation, Labor Organizati	on * 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? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organizati	on * 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? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organizati	on * 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? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organizati	on * 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? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organizati	on * 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? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organizati	on * 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? YES NO
Full Name of Contributor	Employer, Occupation, Labor Organizati	on * 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? YES NO

Page Total \$	63.21
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^{*} Required for contributions form individual over \$100 to statewide and General Assembly candidates. IF contributor is self-employed, occupaton 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)]