

In-Kind Contributions Received

Prescribed by Secretary of State 2/01

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|---|--|--|--|---|
| Name of Committee in Full CITIZENS FOR RANKIN | | | | |
| Full Name of Contributor Mike R. Rankin | | Employer, Occupation, Labor Organization * | | Registration Number, if PAC |
| Street Address 2432 Wyncourtney Drive | | Description of Item or Service Postage for thank you cards | | M D Y Fair Market Value 0 4 0 4 0 5 13.80 |
| City Powell | | State Zip Code O H 43064 | | Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| Full Name of Contributor Mark Serrott | | Employer, Occupation, Labor Organization * | | Registration Number, if PAC |
| Street Address 789-A Northwest Blvd. | | Description of Item or Service food and beverages | | M D Y Fair Market Value 0 4 0 5 0 5 350.00 |
| City Columbus | | State Zip Code O H 43212 | | Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| Full Name of Contributor Elizabeth Gill | | Employer, Occupation, Labor Organization * | | Registration Number, if PAC |
| Street Address 90 E. Mithoff | | Description of Item or Service food and beverages | | M D Y Fair Market Value 0 4 0 5 0 5 324.00 |
| City Columbus | | State Zip Code O H 43206 | | Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO |
| Full Name of Contributor Elizabeth Gill | | Employer, Occupation, Labor Organization * | | Registration Number, if PAC |
| Street Address 90 E. Mithoff | | Description of Item or Service stationery, envelopes | | M D Y Fair Market Value 0 4 0 5 0 5 26.00 |
| City Columbus | | State Zip Code O H 43206 | | Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> 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 Zip Code | | Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> 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 Zip Code | | Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> 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 Zip Code | | Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> 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 Zip Code | | Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO |

* Required for contributions from individual over \$100 to statewide and General Assembly candidates. If contributor is self-employed, occupation 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)]