Page		

## **In-Kind Contributions Received**

Prescribed by Secretary of State 3/05

hr 60	=:					-	
Name of Committee in Full							
Minerva Park for Truth, Transparence					-		
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Edward B. Detwiler		<u> </u>					
Street Address	Description of Item or Service		М	D	Y	Fair Market Value	
5361 Park Lane Dr	Legal Advice		0:7	2 6	1.7	902.50	
City	State	Zip Code	Received	d at Fundi	raising Ev	vent?	
Columbus	$O \perp H$	43231		YES		□NO	
Full Name of Contributor	Employer, Occupation, Labor Organization * Registration Number, if PAC			C			
Street Address	Description of Ite	em or Service	М	D	Y	Fair Market Value	
City	State	Zip Code	Received	d at Fundr	raising Ev		
	<del></del>	<del></del>	4	YES		NO	
Full Name of Contributor	Employer, Occup	oation, Labor Organization *	Registra	tion Num	ber, if PA	AC .	
Street Address	Description of Ite	em or Service	М	D	Y	Fair Market Value	
City	State	Zip Code	Received	d at Fundi	raising Ev	vent?	
				YES		NO	
Full Name of Contributor	Employer, Occupation, Labor Organization * Registration Number, if PAC						
Street Address	Description of Ite	em or Service	М	D	Y	Fair Market Value	
City	State	Zip Code	Received	d at Fundi	raising Ev	vent?	
				YES		NO	
Full Name of Contributor	Employer, Occupation, Labor Organization • Registration Number, if PAC		AC .				
Street Address	Description of Ite	m or Service	М	D	Y	Fair Market Value	
City	State	Zip Code	Received	d at Fundi	raising Ev	vent?	
				YES		□NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Street Address	Description of Ite	em or Service	М	D	Y	Fair Market Value	
City	State	Zip Code	Received	d at Fundi YES	raising Ev	vent?	
Full Name of Contributor	Employer, Occupation, Labor Organization * Regis			legistration Number, if PAC			
Street Address	Description of Item or Service		М	D	Y	Fair Market Value	
City	State	Zip Code	Received	d at Fundi YES	raising Ev	vent?	
			<u> </u>	1			
Full Name of Contributor	Employer, Occup	pation, Labor Organization *	Registra	tion Num	ber, if PA	AC .	
Full Name of Contributor  Street Address	Employer, Occup		Registra		ber, if PA	C Fair Market Value	

Page Total \$	902.50_
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<sup>\*</sup> Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the 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 appear. [R.C. 3517.10(B)(4)]