

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full			
People for Page			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Mills for City Council	City Council		
Street Address	Description of Item or Service	M	D
545 East Town St.	Printing	0	3
City	State	Y	Fair Market Value
Cols.	OH <input checked="" type="checkbox"/>	1	35.26
	Zip Code		
	43215		
Received at Fundraising Event?			
YES NO			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Klein Committee	City Council		
Street Address	Description of Item or Service	M	D
545 East Town St.	Consulting Services	0	4
City	State	Y	Fair Market Value
Columbus	OH <input checked="" type="checkbox"/>	1	850.00
	Zip Code		
	43215		
Received at Fundraising Event?			
YES NO			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Klein Committee	City Council		
Street Address	Description of Item or Service	M	D
545 East Town St.	Consulting Services	0	4
City	State	Y	Fair Market Value
Columbus	OH <input checked="" type="checkbox"/>	6	500.00
	Zip Code		
	43215		
Received at Fundraising Event?			
YES NO			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Mills for City Council	City Council		
Street Address	Description of Item or Service	M	D
545 East Town St.	TV Time	0	4
City	State	Y	Fair Market Value
Cols.	OH <input checked="" type="checkbox"/>	1	50,509.13
	Zip Code		
	43215		
Received at Fundraising Event?			
YES NO			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M	D
City	State	Y	Fair Market Value
	OH <input checked="" type="checkbox"/>		
	Zip Code		
Received at Fundraising Event?			
YES NO			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M	D
City	State	Y	Fair Market Value
	OH <input checked="" type="checkbox"/>		
	Zip Code		
Received at Fundraising Event?			
YES NO			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service	M	D
City	State	Y	Fair Market Value
	OH <input checked="" type="checkbox"/>		
	Zip Code		
Received at Fundraising Event?			
YES NO			

* 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)]

\$51,894.39
Page Total ~~\$0.00~~