



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee Citizens to Elect John Pritchard				
Full Name of Contributor John J. Pritchard		Employer, Occupation, Labor Organization* DLA/Attorney		Registration Number, if PAC
Street Address 4887 Bay Grove Court		Description of Item or Service Yard Signs		Date (MM/DD/YYYY) Fair Market Value 08/27/2019 \$759.50
City Groveport		State OH	Zip Code 43125	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Full Name of Contributor John J. Pritchard		Employer, Occupation, Labor Organization* DLA/Attorney		Registration Number, if PAC
Street Address 4887 Bay Grove Court		Description of Item or Service Avery Labels for Mailers		Date (MM/DD/YYYY) Fair Market Value 09/06/2019 \$8.97
City Groveport		State OH	Zip Code 43125	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Full Name of Contributor John J. Pritchard		Employer, Occupation, Labor Organization* DLA/Attorney		Registration Number, if PAC
Street Address 4887 Bay Grove Court		Description of Item or Service Large Yard Sign Supplies		Date (MM/DD/YYYY) Fair Market Value 09/09/2019 \$109.97
City Groveport		State OH	Zip Code 43125	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Full Name of Contributor John J. Pritchard		Employer, Occupation, Labor Organization* DLA/Attorney		Registration Number, if PAC
Street Address 4887 Bay Grove Court		Description of Item or Service Direct Mailing Services		Date (MM/DD/YYYY) Fair Market Value 10/18/2019 \$466.13
City Groveport		State OH	Zip Code 43125	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address		Description of Item or Service		Date (MM/DD/YYYY) Fair Market Value
City		State	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input type="checkbox"/> 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)]

Page Total \$ _____