

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Citizens for Hawk			
Full Name of Contributor Teresa L Edwards	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 5611 Belle Oak Dr	Description of Item or Service Food & Beverage- 6/14 Event		M D Y Fair Market Value 0 6 1 4 1 2 \$822.00
City Galloway	State OH	Zip Code 43119	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor Linda Stickney	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 1730 Arlington Ave	Description of Item or Service Food & Beverage- 8/8 Event		M D Y Fair Market Value 0 8 0 8 1 2 \$659.00
City Columbus	State OH	Zip Code 43212	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor Teresa L Edwards	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 5611 Belle Oak Dr	Description of Item or Service Food & Beverage- 8/15 Event		M D Y Fair Market Value 0 8 1 6 1 2 \$564.15
City Galloway	State OH	Zip Code 43119	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> 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 OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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 OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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 OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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 OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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 OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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)]