

In-Kind Contributions Received

Prescribed by Secretary of State 2/01

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 0 4 0 4 0 5	Fair Market Value 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 0 4 0 5 0 5	Fair Market Value 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 0 4 0 5 0 5	Fair Market Value 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 0 4 0 5 0 5	Fair Market Value 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)]