

In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

| | | | | |
|--------------------------|-----------------------------------|---|---|-----------------------------|
| Full Name of Committee | | | | |
| KEEP HILLIARD BEAUTIFUL | | | | |
| Full Name of Contributor | | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| FRANK CARRIER | | | | |
| Street Address | Description of Item or Service | | Date (MM/DD/YYYY) | Fair Market Value |
| 4394 SHIRE CREEK COURT | POSTAGE | | 10/18/2018 | 250.00 |
| City | State | Zip Code | Received at Fundraising Event? | |
| HILLIARD | OH | 43026 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Full Name of Contributor | | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| IMRAN AHMED | | | | |
| Street Address | Description of Item or Service | | Date (MM/DD/YYYY) | Fair Market Value |
| 5012 SILVER WOODS LANE | SUPPLIES FUND RAISER (SAM'S CLUB) | | 10/07/2018 | 11.96 |
| City | State | Zip Code | Received at Fundraising Event? | |
| DUBLIN | OH | 43016 | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| Full Name of Contributor | | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| IRRAN AHMED | | | | |
| Street Address | Description of Item or Service | | Date (MM/DD/YYYY) | Fair Market Value |
| 5012 SILVER WOODS LANE | SUPPLIES FUND RAISER (WAL-MART) | | 10/07/2018 | 10.85 |
| City | State | Zip Code | Received at Fundraising Event? | |
| DUBLIN | OH | 43016 | <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 | | Date (MM/DD/YYYY) | 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 | | 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)]