

# In-Kind Contributions Received

Prescribed by Secretary of State 03/05

|   |  |   |                          |   |
|---|--|---|--------------------------|---|
| Name of Committee in Full<br><b>COMMITTEE TO ELECT JAMES MCGREGOR</b> |  |   |                          |   |
| Full Name of Contributor<br><b>GREG KITZMILLER</b>                    |  | Employer, Occupation, Labor Organization*<br><b>GREAT IMPRESSIONS</b> |                          | Registration Number, if PAC   |
| Street Address<br><b>1148 GOLD PLACE</b>                              |  | Description of Item or Service<br><b>4" X 8" BANNERS</b>              |                          | M   D   Y   Fair Market Value<br><b>1   0   0   4   1   1   \$720.00</b>                        |
| City<br><b>COLUMBUS</b>   |  | State<br><b>OH</b>  | Zip Code<br><b>43230</b> | Received at Fundraising Event?<br><input type="radio"/> YES <input checked="" type="radio"/> NO |
| Full Name of Contributor<br><b>CRAIG PANNIER</b>                      |  | Employer, Occupation, Labor Organization*<br><b>ABCO GAHANNA, LLC</b> |                          | Registration Number, if PAC   |
| Street Address<br><b>146 N. HAMILTON RD.</b>                          |  | Description of Item or Service<br><b>CAMPAIGN ENVELOPES</b>           |                          | M   D   Y   Fair Market Value<br><b>0   7   2   9   1   1   \$60.00</b>                         |
| City<br><b>GAHANNA</b>  |  | State<br><b>OH</b>  | Zip Code<br><b>43230</b> | Received at Fundraising Event?<br><input type="radio"/> YES <input checked="" 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<br><b>OH</b>  | Zip Code                 | Received at Fundraising Event?<br><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<br><b>OH</b>  | Zip Code                 | Received at Fundraising Event?<br><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<br><b>OH</b>  | Zip Code                 | Received at Fundraising Event?<br><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<br><b>OH</b>  | Zip Code                 | Received at Fundraising Event?<br><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<br><b>OH</b>  | Zip Code                 | Received at Fundraising Event?<br><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)]

Page Total **\$780.00**