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In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full								
Citizens for Fos		S. 1-t O sentingland	In a state of	· · · · · · · · · · · · · · · · · · ·	i !či			
Full Name of Contributor Diane Fosselman		Employer, Occupation, Labor Organization*			Registration Number, if PAC			
Street Address 1260 Autumn Park: Court	Description of Ite Campaigr	Description of Item or Service Campaign letters/ envelopes			1 5	Fair Market Value		
City	Sta te	Zip Code	0 9 Received	1 5 d at Fund	\bot			
Westerville	ОН	43081	☐ YES	3	X	NO		
Full Name of Contributor	Employer, Occu	Employer, Occupation, Labor Organization*			Registration Number, if PAC			
Street Address	Description of Ite	em or Service	M	D	Y	Fair Market Value		
City	Sta te	Zip Code	Received	d at Fund		Event?		
Full Name of Contributor	Employer, Occu	Employer, Occupation, Labor Organization*		Registration Number, if PAC				
Street Address	Description of Its	em or Service	М	D	Y	Fair Market Value		
City	Sta tc	Zip Code	Received	d at Fund	_	Event?		
Full Name of Contributor	Employer, Occu	pation, Labor Organization*		tion Num				
Street Address	Description of It	em or Service	М	D	Y	Fair Market Value		
City	Sta te	Zip Code	Receive	d at Fund	_	Event?		
Full Name of Contributor	Employer, Occu	upation, Labor Organization*		tion Nun				
Street Address	Description of It	em or Service	M	D	Y	Fair Market Value		
City	Sta te	Zip Code	Receive	d at Fund				
Full Name of Contributor	Employer, Occu	Employer, Occupation, Labor Organization*			Registration Number, if PAC			
Street Address	Description of It	em or Service	M	D	Y	Fair Market Value		
City	Sta te	Zip Code	Receive	ed at Fund	_	Event?		
Full Name of Contributor	Employer, Occu	upation, Labor Organization*		ation Nur				
Street Address	Description of It	tem or Service	M	D	Y	Fair Market Value		
City	Sta te	Zip Code	Receive	d at Fund	•	Event?		
Full Name of Contributor	Employer, Occi	upation, Labor Organization*		ation Nur				
Street Address				Fair Market Value				
City	Sta te	Zip Code	Receive	ed at Fun ES		g Event?		

Page Total \$ 206.41

^{*} 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)]