

# In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Beryl Piccolantonio</b>			
Full Name of Contributor <b>Friends of Marilyn Brown</b>		Employer, Occupation, Labor Organization *	
Street Address <b>550 E. Walnut St.</b>		Description of Item or Service <b>emails</b>	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Registration Number, if PAC <b>018119113</b>
Fair Market Value <b>50.00</b>		Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor <b>Beryl Piccolantonio</b>		Employer, Occupation, Labor Organization *	
Street Address <b>742 McDonell Pl.</b>		Description of Item or Service <b>Creepsie candy</b>	
City <b>Gahanna</b>	State <b>OH</b>	Zip Code <b>43230</b>	Registration Number, if PAC <b>110116113</b>
Fair Market Value <b>60.00</b>		Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor <b>Marilyn Brown</b>		Employer, Occupation, Labor Organization *	
Street Address <b>34 W. Poplar Ave.</b>		Description of Item or Service <b>postage</b>	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43215</b>	Registration Number, if PAC <b>110011113</b>
Fair Market Value <b>286.00</b>		Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City	State	Zip Code	Registration Number, if PAC
Fair Market Value		Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City	State	Zip Code	Registration Number, if PAC
Fair Market Value		Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City	State	Zip Code	Registration Number, if PAC
Fair Market Value		Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City	State	Zip Code	Registration Number, if PAC
Fair Market Value		Received at Fundraising Event?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Description of Item or Service	
City	State	Zip Code	Registration Number, if PAC
Fair Market Value		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 the 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 appear. [R.C. 3517.10(B)(4)]