31-J-1 R.C. 3517.10

## **In-Kind Contributions Received**

Page 1

Prescribed by Secretary of State 03/05

	Prescribed by Secretary of State 03/03	
Name of Committee in Full Citizens for Mingo		
	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Full Name of Contributor Terrance Jones	Canton Negro Old Timers	1 ~
Street Address	Description of Item or Service	M D Y Fair Market Value
1844 Ira Turpin Way NE	Room Rental/Invitations	0 8 2 3 0 8 \$475.00
City	State Zip Code	Received at Fundraising Event?
Canton	OH 44705	OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Stephanie Gibson	Self/Attorney	
Street Address	Description of Item or Service	M D Y Fair Market Value
130 E. Chestnut St., Ste. 402	Food & Beverage	0 9 0 4 0 8 \$102.80
City	Stalte Zip Code	Received at Fundraising Event?
Columbus	OH 43215	O YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Beverly Corner	B.J. Corner, LPA	
Street Address	Description of Item or Service	M D Y Fair Market Value
5918 Sharonwood Blvd., Ste. 100	Food & Beverage	1 0 1 7 0 8 \$225.00
City	State Zip Code	Received at Fundraising Event?
Columbus	OH 43229	O YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Robert Bannerman	Robert Bannerman LLC/A	
Street Address	Description of Item or Service	M D Y Fair Market Value
P.O. Box 77466	Food & Beverage	1 0 1 7 0 8 \$225.00
City	Stal te Zip Code	Received at Fundraising Event?
Columbus	OH 43207	O YES O 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	Stal te Zip Code	Received at Fundraising Event?
	OH	OYES ONO
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
on oct / Kanoss		
City	Stal te Zip Code	Received at Fundraising Event?
	OH	O YES O 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	Sta te Zip Code	Received at Fundraising Event?
	OH	O YES O 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?
NAME OF THE PARTY	OH	Oyes O NO

Page Total \$1,027.80

<sup>\*</sup> 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)]