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In-Kind Contributions Received

Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full Support LaCorte Campaign					
			In the state of	1 CPA G	
Full Name of Contributor Leslie LaCorte	Employer, Occupa	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Docarintian of Itam	or Comico	M D	Y Fair Market Value	
	· ·	Description of Item or Service			
5066 Etna Rd	Bank Fee	Bank Fee		0 2 0 2 1 2 \$16.75	
City	Sta te	Zip Code	Received at Fur	ndraising Event?	
Whitehall	OH	OH 43213		OYES O NO	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Item	Description of Item or Service		Y Fair Market Value	
Cíty	Sta te	Zip Code	Received at Fur	ndraising Event?	
	OH	OH		O YES O NO	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Item	or Service	M D	Y Fair Market Value	
City	Stalte OH	Zip Code		ndraising Event?	
6.1131			OYES	O NO	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Item	Description of Item or Service		Y Fair Market Value	
City	State OH	Zip Code	Received at Fur	ndraising Event?	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Item	Description of Item or Service		Y Fair Market Value	
City	Starte OH	Zip Code	Received at Fur	ndraising Event?	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Item	Description of Item or Service		Y Fair Market Value	
City	Stal te	Zip Code	Received at Fur	ndraising Event?	
	OH		O YES	O NO	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Item	Description of Item or Service		Y Fair Market Value	
City	State Zip Code		Received at Fundraising Event?		
	OH	OH		OYES O NO	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
.Street Address	Description of Item	Description of Item or Service		Y Fair Market Value	
Cin.	F. 1.	Zin Code	Passing	adenising Fuart?	
City	Stal te OH	Zip Code	OYES	ndraising Event? O NO	

Page Total \$16.75

^{*} 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)]