

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Committee to Re-Elect Shawn M. Cleary			
Full Name of Contributor Shawn M. Cleary	Employer, Occupation, Labor Organization * SELF	Registration Number, if PAC	
Street Address 5147 Phillips Run	Description of Item or Service	M D Y 11 18 11	Fair Market Value 528.18
City Canal Winchester	State Zip Code OH 43110	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> 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? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC	
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* 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)]

528.18

Page Total \$ 0.00