

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Friends of Lori Gerald			
Full Name of Contributor Larry Gilbert		Employer, Occupation, Labor Organization* Larry Gilbert - Self Employed	
Street Address 382 Westview Avenue		Description of Item or Service Buttons	
City Columbus		State OH	Zip Code 43214
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor Richard Fowler		Employer, Occupation, Labor Organization* State of Ohio - EPA	
Street Address 57 Westview Avenue		Description of Item or Service Postage stamps	
City Columbus		State OH	Zip Code 43214
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor Kathy Walters		Employer, Occupation, Labor Organization* Unemployed - Retired	
Street Address 5250 Riverside Drive		Description of Item or Service Postage stamps	
City Columbus		State OH	Zip Code 43214
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State	Zip Code
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	

* 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)]