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Page	3	

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

21 ame of Committee in Full			<u></u>					
Columbus Citizens for Good Government				7-				
Full Name of Contributor			pation, Labor Organization	Registra	Registration Number, if PAC			
Citizens for Strong Neighborhoods & C			·	M				
	nescubi	Description of Item or Service			D	Y.	Fair Market Value	
550 E Walnut St		Le ate	gal Services	0 2			,	
Calomakasa			Zip Code	Receive	ed at Fun	draising :		
Columbus Full Name of Contributor		O H 43215			AES X NO			
Full Alame of Contributor	Employ	Employer, Occupation, Labor Organization Registration Number, if F				nber, if P	AC	
Street Address	Descript	Description of Item or Service			D	Y	Fair Market Value	
City	St	ate	Zip Code	Receive	d at Fun YES	draising !	Event?	
Full Name of Contributor	Employe	Erriployer, Occupation, Labor Organization Regist			gistration Number, if PAC			
Street Address	Descript	Description of Item or Service		M	D	Ý	Fair Market Value	
City	St	ate	Zip Code	Receive	d at Fun YES	draising 1	Event? NO	
Full Name of Contributor	Employe	ег, Оссир	oation, Labor Organization	Registration Number, if PAC				
Street Address	Descript	Description of Item or Service		М	D	Y	Fair Market Value	
City	St	ate	Zip Code	Receive	d at Fun YES	dreising 1	Event? NO	
Full Hame of Contributor	Employe	Employer, Occupation, Labor Organization Re			Registration Number, if PAC			
Street Address	Descript	Description of Item or Service		М	D	Y	Fair Market Value	
City	St.	ate	Zip Code	Receive	d at Fun	draising :	Event?	
		1			YES		NO	
Full Hame of Contributor	Employe	ег, Оссиј	pation, Labor Organization	Registration Humber, if PAC				
Street Address	Descript	Description of Item or Service		M	D	Y	Fair Market Value	
City	St	ate	Zip Code	Receive	d at Fum	draising :	Event?	
Full Name of Contributor	Employe	Employer, Occupation, Labor Organization			Registration Number, if PAC			
Street Address	Descript	Description of Item or Service		M	D '	Y	Fair Market Value	
City	St	ate	Zip Code	Received at Fundraising Event? YES NO				
Full Name of Contributor	Employe	Employer, Occupation, Labor Organization			Registration Number, if PAC			
Street Address	Descript	Description of Item or Service		M	D !	Y,	Fair Market Value	
City	State Zip Code			Received at Fundraising Event?				
			<u></u>		YES		мо	

Page Total \$ 1,266.39

^{*} Required for contributions from individuals over \$100 to statewide and general assembly candidates. It 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]]