In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full			
Gard For Council			
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC
Sign A Rama Hilliard			
Street Address	Description of Item or Service		M D Y Fair Market Value
3814 Fishinger Blvd			1 1 0 5 0 9 670.00
City	State	Zip Code	Received at Fundraising Event?
Hilliard	OH	43026	YES VNO
Full Name of Contributor		pation, Labor Organization *	Registration Number, if PAC
Warren Gard			
Street Address	Description of Item or Service		M D Y Fair Market Value
1658 Cayuga Ct.	De	ebts forgiven	1 1 0 6 0 9 350.00
City	State	Zip Code	Received at Fundraising Event?
Grove City		43123	YES VNO
Full Name of Contributor		pation, Labor Organization *	Registration Number, if PAC
run Name of Contributor	Employer, Occu	pation, Labor Organization	registration Number, if I AC
Street Address	Description of It	em or Service	M D Y Fair Market Value
City	State	Zip Code	Received at Fundraising Event?
	Section 1	1	T YES NO
Full Name of Contributor	Employer, Occur	pation, Labor Organization *	Registration Number, if PAC
			,
Street Address	Description of Item or Service		M D Y Fair Market Value
broot / Kidioss			
City	State	Zip Code	Received at Fundraising Event?
City		Lap cour	YES NO
Full Name of Contributor	Employer Occu	pation, Labor Organization *	Registration Number, if PAC
run ivane of Controlitor	Employer, occupation, Euros Organization		Registration Pumber, it 1710
Street Address	Description of It	am or Sarvina	M D Y Fair Market Value
Succi Address	Description of Item or Service		1 an warket value
7'	State	Zip Code	Received at Fundraising Event?
City	State	Zip Code	YES NO
0.0			
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address	Description of It	em or Service	M D Y Fair Market Value
City	State	Zip Code	Received at Fundraising Event?
			YES NO
Full Name of Contributor	Employer, Occu	pation, 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?
	100		YES 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?
	i		YES NO
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Page Total \$ 1,020.00

^{*} Required for contributions form individual over \$100 to statewide and General Assembly candidates. IF contributor is self-employed, occupation 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)]