In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full				
Citizens for Mingo				
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Terrance Jones	Canton Negro Old Timers			
Street Address	Description of Item or Service		M D	Y Fair Market Value
1844 Ira Turpin Way NE	Room Rental/Invitations		0 8 2 3	3 0 8 \$475.00
City	Sta te	Zip Code	1 1 1	indraising Event?
Canton	OH	44705	O YES	O NO
Full Name of Contributor	Employer, Occupa	tion, Labor Organization*	Registration Number, if PAC	
Stephanie Gibson	Self/Attorney			
Street Address	Description of Item or Service		M D	Y Fair Market Value
130 E. Chestnut St., Ste. 402	Food & Beverage		0 9 0 4	0 8 \$102.80
City	State	Zip Code		indraising Event?
Columbus	OH	43215	O YES	O NO
Full Name of Contributor		tion, Labor Organization*	Registration Number, if PAC	
Beverly Corner	B.J. Corner, LPA			
Street Address	Description of Item	· · · ·	M D Y Fair Market Value	
5918 Sharonwood Blvd., Ste. 100	Food & Beverage		1 0 1 7	0 8 \$225.00
City	Sta te	Zip Code	Received at Fundraising Event?	
Columbus	ОН	43229	O YES	О мо
Full Name of Contributor		tion, Labor Organization*	Registration N	
Robert Bannerman	Robert Bannerman LLC/A			·
Street Address	Description of Item or Service		M D	Y Fair Market Value
P.O. Box 77466	Food & Beverage		1 0 1	7 0 8 \$225.00
City	Sta te	Zip Code		andraising Event?
Columbus	ОН	43207	O YES	O NO
Full Name of Contributor		tion, Labor Organization*	Registration N	
Tan Hanc of Conditions		,		·
Street Address	Description of Item or Service		M D	Y Fair Market Value
	•			
City	Sta te	Zip Code	Received at Fu	indraising Event?
City	ОН		O YES	O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Tun Tunie of Conditions		,		,
Street Address	Description of Item or Service		M D	Y Fair Market Value
bucci /idaicos	2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -			
City	Sta te	Zip Code	Received at Fu	andraising Event?
City	OH		O YES	-
Full Name of Contributor				NO Jumber, if PAC
Tuli Name of Controller	Zimpioyen, o eeups			,
Street Address	Description of Item or Service		M D	Y Fair Market Value
Succi radios	22227		and the second s	
City	Sta te	Zip Code	Received at Fu	undraising Event?
ony .	OH 2sp code		OYES	O NO
Full Name of Contributor		tion, Labor Organization*	THE REAL PROPERTY AND ADDRESS OF THE PARTY AND	Jumber, if PAC
i un ramo di Continutoi	mp.c., c., c.coupe	,		,
Street Address	Description of Item or Service		M D	Y Fair Market Value
DUOU AUGUSS				
City	Sta te	Zip Code	Received at Fr	undraising Event?
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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 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)]