## RECEIVED

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## **In-Kind Contributions Received**

2010 SEP 24 PM 12: 39
Prescribed by Secretary of State 3/05

Name of Committee in Full FRASHALIS UUUNI							
The Committee to Elect Chris Long BOARD OF ELECTIONS							
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Chris Long	<u>Candidate</u>		<del> </del>			Iv- 1 34 1 1 37.1	
Street Address	Description of Item or Service		M	D 1 77	Y O : O	Fair Market Value	
1675 Haft Drive	Door Hanger Bags			1 7			
City	State H	Zip Code 43068	Received	d at Fundr YES	aising Ev	vent?	
Reynoldsburg			Registration Number, if PAC				
Full Name of Contributor	Employer, Occupation, Labor Organization *  Candidate		Registration Number, if PAC				
Chris Long	Description of Item	Description of Item or Service		M D Y Fair Market Value			
Street Address	Web. Contribution Page			1 7			
1675 Haft Drive	State Zip Code			d at Fundr			
City  Description of delegations	H	43068	Receive	YES	aising Lv	NO	
Reynoldsburg Full Name of Contributor		ation, Labor Organization *	Registra		her if PA		
g	Candidate		Registration Number, if PAC				
Chris Long Street Address	Description of Item or Service		M D Y Fair Market Value				
1675 Haft Drive		ard Signs	0 4	2 2			
City	State	Zip Code		d at Fundr			
Revnoldsburg	H	43068		YES		✓ NO	
Full Name of Contributor	Employer, Occup	ation, Labor Organization *	Registra	tion Numl	ber, if PA	AC	
Chris Long		Candidate					
Street Address	Description of Item or Service			D	Y	Fair Market Value	
1675 Haft Drive	Mail Piece		0:4	3 0	0:9	721.36	
City	State	Zip Code	Receive	d at Fundi	raising Ev	vent?	
Reynoldsburg	OH	43068		YES		✓NO	
Full Name of Contributor	Employer, Occup	Registration Number, if PAC					
Chris Long	Candidate						
Street Address	Description of Item or Service		М	D	Y	Fair Market Value	
1675 Haft Drive		Postage	0 4	3 0	0 9	21.00	
City	State	Zip Code	Receive	d at Fundi	raising E	vent?	
Reynoldsburg	$\cap$ H	43068		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	
					يلل		
City	State	Zip Code	Receive	d at Fund	raising E		
				YES		NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registra	tion Num	ber, if PA	AC	
			+	1 5	Ιv	Tois Market Volus	
Street Address	Description of Item or Service		M	D	Y	Fair Market Value	
	Ct-t-	7: 0-1-	Dagging	d at Fund	roisina E	Lont?	
City	State	Zip Code	Receive	a at Funa YES	iaising E	vent?	
Tall Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC				
Full Name of Contributor	Employer, Occupation, Labor Organization *		Negisila	aon ivalli	ooi, ii i'?		
Street Address	Description of Item or Service		М	D	Y	Fair Market Value	
				l i			
City	State	Zip Code	Receive	d at Fund	raising E		
NAME OF THE PARTY				] YES		NO	

<sup>\*</sup> 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)]