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Page	1

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Committee to Elect Erin Upchurch								
Full Name of Contributor	Employer,	Occupati	on, Labor Organization *	Registration Number, if PAC				
Merisa K. Bowers - From 31-N								
Street Address	Description	of Item	or Service	M	D.	Y	Fair Market Value	••••
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Debts Forgiven			Ta: a i	0 6				250.00
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Full Name of Contributor	Employer,	Occupati	on, Labor Organization *	Registrat	ion Number	, if PAC		
Street Address	Description of Item or Service		or Service	М	D	Y	Fair Market Value	
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Full Name of Contributor		0 .:				'CD46		
ruii Name of Contributor	Employer, Occupation, Labor Organization *		on, Labor Organization *	Registration Number, if PAC				
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City	Stat	<u>. I</u>	Zip Code	Received	at Fundrais	ing Eve	mi?	
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T 113) CO . 17 .			<u> </u>		YES			
Full Name of Contributor	Employer, Occupation, Labor Organization *		on, Labor Organization *	Registration Number, if PAC				
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			1		YES		х мо	
Full Name of Contributor	Employer, Occupation, Labor Organization *		on, Labor Organization *	Registrat	ion Number	r, if PAC	2	
Street Address	Description of Item or Service		or Service	M	D	Y	Fair Market Value	
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City	Stat		Zip Code	Received	at Fundrais	ing Eve	nt?	
Cay	1	~	Zip code	I Received		ing Lve		
	į i		<u> </u>	<u> </u>	YES		X NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		on, Labor Organization *	Registrat	ion Number	r, if PAC	3	
				 				
Street Address	Description of Item or Service		or Service	М	D	Y	Fair Market Value	
City	Stat	e	Zip Code	Received	at Fundrais	sing Eve	nt?	
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Full Name of Contributor	Employer	Occupati	on, Labor Organization *	Pegietrat	ion Number	· if PAC		
Tan Name of Conditions	Employer,	Occupan	on, Lacor Organization	Registrat	ion ivanioe.	, II I AC	-	
Street Address	Description	of Item	or Service	M.	D.	Y.	Fair Market Value	
54 501 - 1 dai 525	Description of Item or Service		or service	"1		'	Tun Market Variation	
0.4			In: o i	 		ليا		
City	Stat	°	Zip Code	Received	l at Fundrai	sing Eve		
					YES		x NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		on, Labor Organization *	Registrat	ion Numbe	r, if PAC		
Street Address	Description	of Item	or Service	M!	D	Y	Fair Market Value	
DUOVI FRANCOS	Description of Item or Service		OI SCIVICE	I M	"		1. UT IAISTIFC! A STOC	
City	Stat	. T	Zip Code	Received	at Fundrai	ring Five	unt?	
ca,	3000	~	Zip Code	Keceived		ang Eve		
			L		YES		χ мо	

Page Total \$	250.00

^{*} 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)]