31-J-1 R.C. 3517.10

FOR PAPER FILING ONLY In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full Painter for Council		
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Brett Sciotto		Registration Number, if PAC
	Governing Dynamic	
Street Address	Description of Item or Service	M D Y Fair Market Value 0 4 2 7 1 1 \$162.00
3701 Boathouse Drive	Automated Telephone Calls	0 4 2 7 1 1 \$162.00
City	Stal te Zip Code	Received at Fundraising Event?
Hilliard	OH 3 43026	OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Nathan D. Painter	Nathan D. Painter, LLC	!
Street Address	Description of Item or Service	M. D. Y. Fair Market Value
6188 Pollard Place Drive	Postage	0 4 2 7 1 1 \$440.00
City	State Zip Code	Received at Fundraising Event?
	OH 🖾 43026	
Hillaird	10020	Oyes Ono
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
5	D : :: Ch Ci	75 76 Cain Manday Value
Street Address	Description of Item or Service	M D Y Fair Market Value
City	Sta te Zip Code	Received at Fundraising Event?
	OH 🖃	OYES O 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?
	OH 🕙	OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
7 43 (1 43 (1 6) 6 (3) (1 7)		,
Street Address	Description of Item or Service	M D Y Fair Market Value
Pricet variety	Description of Rein of Bervice	Tan market take
	7: 0 +	B i I B i i B i i B
City	Stal te Zip Code	Received at Fundraising Event?
		O YES O 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
		20 10 10 10 10 10 10 10 10 10 10 10 10 10
City	StateZip Code	Received at Fundraising Event?
	OH 🔙	O YES O 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
Succi radicss	Description of them by believe	
	7: 6 1	Desired a Feed delicer France
City	State Zip Code	Received at Fundraising Event?
	OH 🗷	O YES O 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
		Vannor Pri
City	State Zip Code	Received at Fundraising Event?
	OH 🖭	Oyes O NO
	<u> </u>	1.0 C NO

^{*} 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)]