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In-Kind Contributions Received

Page	<u> </u>

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Committee for Cindy Lazarus			
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
The Plymale Partnership	Law Office	Registration remises, 12.1.2	
Street Address	Description of Item or Service	M D Y Fair Market Value	
495 S High Street	ligh Street Beverages for volunteers		
City	State Zip Code	Received at Fundraising Event?	
Columbus	OH 53215	OYES O NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
The Plymale Partnership	Law office		
Street Address	Description of Item or Service	M D Y Fair Market Value	
495 S High Street	office space & phone resources	0 2 1 8 0 8 \$1,200.00	
City	State Zip Code	Received at Fundraising Event?	
Columbus	OH 43215	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	
Street Address	Description of item of Service	Na D 1 an ividice 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	
Street Address	Description of Item or Service	M D Y Fair Market Value	
City	State Zip Code	Received at Fundraising Event?	
	OH	OYES ONO	
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	Sta te Zip Code	Received at Fundraising Event?	
c.i.y	OH	OYES ONO	
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
an rane of opening			
Street Address	Description of Item or Service	M D Y Fair Market Value	
onot realiss			
City	State Zip Code	Received at Fundraising Event?	
City	OH Presult		
Full Name of Contributor	Employer, Occupation, Labor Organization*	NO YES NO Registration Number, if PAC	
Full Name of Contributor	Employer, Occupation, Lavor Organization	Registration Number, 1. 1780	
Street Address	Description of Item or Service	M D Y Fair Market Value	
Street Address	Section of Mean or Control		
C:t-:	Sta te Zip Code	Received at Fundraising Event?	
City	OH Zip Code		
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC	
Full Name of Contributor	Employer, Occupation, Labor Organization	Registration Pullioti, il 1740	
Street Address	Description of Item or Service		
City	Stal te Zip Code	Received at Fundraising Event?	
	OH	Oyes O NO	

Page Total \$1,222.50

^{*} 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)]