



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

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|--|--|--|--------------------------|--|
| Full Name of Committee Friends of Lori J. Elmore | | | | |
| Full Name of Contributor Flavor 91 Inc. | | Employer, Occupation, Labor Organization* Restaurant | | Registration Number, if PAC |
| Street Address 5186 E. Main St. | | Description of Item or Service Food for fundraisers | | Date (MM/DD/YYYY) 09/30/2017 |
| City Whitehall | | State OH | Zip Code 43213 | Fair Market Value 200.00 |
| | | Received at Fundraising Event? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Full Name of Contributor | | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address | | Description of Item or Service | | Date (MM/DD/YYYY) |
| City | | State | Zip Code | Fair Market Value |
| | | Received at Fundraising Event? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Full Name of Contributor | | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address | | Description of Item or Service | | Date (MM/DD/YYYY) |
| City | | State | Zip Code | Fair Market Value |
| | | Received at Fundraising Event? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Full Name of Contributor | | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address | | Description of Item or Service | | Date (MM/DD/YYYY) |
| City | | State | Zip Code | Fair Market Value |
| | | Received at Fundraising Event? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Full Name of Contributor | | Employer, Occupation, Labor Organization* | | Registration Number, if PAC |
| Street Address | | Description of Item or Service | | Date (MM/DD/YYYY) |
| City | | State | Zip Code | Fair Market Value |
| | | Received at Fundraising Event? <input type="checkbox"/> Yes <input type="checkbox"/> 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)]

Page Total \$ 200.00