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In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full					
Kusma for Kids					
Full Name of Contributor	Employer Occum	action Labor Organization *	Registration Numb	w if DAC	
Michele Kusma	Employer, Occupation, Labor Organization *		Registration Nuttu	a, ii rac	
Street Address	Description of Item or Service		M D	Y Fair Market Value	
2765 Brentwood Rd	OSBA Meeting Fee		019 018	0 7 60.00	
City	State Zip Code		Received at Fundraising Event?		
Bexlev	O H 43209		YES NO		
Full Name of Contributor	Employer, Occup	nation, Labor Organization *	Registration Numb	er, if PAC	
Michele Kusma	ļ				
Street Address	Description of Item or Service		M D	Y Fair Market Value	
2765 Brentwood Rd	Web Site Fees		0 9 0 3	0 7 20.14	
City	State	Zip Code	Received at Fundr		
Bexley Full Name of Contributor	O H	43209	YES	√N0	
Michele Kusma	Employer, Occup	nation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Ite	en or Service			
2765 Brentwood Rd	I		M D 1 8	Y Fair Market Value 16.79	
City	Campaign Supplies State Zip Code		Received at Fundr		
Bexlev	lo TH	43209	YES	NO NO	
Full Name of Contributor	11 / /	ation, Labor Organization *	Registration Numb		
Michele Kusma					
Street Address	Description of Item or Service		M D	Y Fair Market Value	
2765 Brentwood Rd		Postage	1 0 1 8	0 7 6.15	
City	State	Zip Code	Received at Fundr		
Bexlev	$O \mid H$	43209	YES	NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *		Registration Number, if PAC		
Street Address	Description of Item or Service		MIDI	Y Fair Market Value	
		an of our rec	" "		
City	State	Zip Code	Received at Fundr	aising Event?	
		1	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	
City	State	Zip Code	Received at Fundr		
			YES	∐ио	
Full Name of Contributor	Employer, Occup	ation, Labor Organization *	Registration Numb	per, if PAC	
Street Address	Description of Item or Camina		MID	Y Fair Market Value	
Sect Made is	Description of Item or Service			l landinance value	
City	State	Zip Code	Received at Fundr	aising Event?	
			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	
			1 1	· • •	
City	State	Zip Code	Received at Funds	aising Event?	
	1		YES	Пио	

Page Total \$	103.08

^{*} 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)]