



In-Kind Contributions Received

Form 31-J-1

						R.C. 3517.10	
Full Name of Committee Friends of Greta Kearns for Grandview							
Full Name of Contributor Stephanie Wolfe			Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address	Descripti	on of Item or S	Service		Date (MM/DD/YYYY)	Fair Market Value	
1184 Glenn Ave	1		Graphic Design Services		12/04/2017		
City		State	Zip Code	Received at Fundraisi	ng Event?		
Columbus		ОН	43212	☐ Yes ☒ No			
Full Name of Contributor			Employer, Occupation, Labor Organization* Registration Number, if PAC				
Street Address Description of Item or		Service		Date (MM/DD/YYYY)	Fair Market Value		
City		State OH	Zip Code	Received at Fundraisin	ng Event?		
Full Name of Contributor			Employer, Occupation	pation, Labor Organization* Registration Number, if PAC			
Street Address	Description of Item or S		Service		Date (MM/DD/YYYY)	Fair Market Value	
City		State	Zip Code	Received at Fundraisi	ng Event?		
		ОН		☐ Yes 🕱 No			
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City		State	Zip Code	Received at Fundraisi	ng Event?		
		ОН		☐ Yes 🕱 No			
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Street Address Description of Ite		ion of Item or S	Service		Date (MM/DD/YYYY)	Fair Market Value	
City State OH		Zip Code	Received at Fundraisi	ing Event?			
	——————————————————————————————————————	* **					

680.00	
Page Total \$	

^{*} 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)]