

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Citizens for UA Schools				
Full Name of Contributor RICOH USA		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address 300 West Wilson Bridge Road		Description of Item or Service Printing Services		M D Y Fair Market Value 1 0 1 0 1 2 750.00
City Worthington		State OH	Zip Code 43085	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor Ohio Education Association		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address 225 East Broad Street		Description of Item or Service Voter Lists		M D Y Fair Market Value 0 7 1 8 1 2 1,224.30
City Columbus		State OH	Zip Code 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor Ohio Education Association		Employer, Occupation, Labor Organization *		Registration Number, if PAC
Street Address 225 East Broad Street		Description of Item or Service Voter Lists		M D Y Fair Market Value 0 9 2 4 1 2 12.20
City Columbus		State OH	Zip Code 43215	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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? <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		M D Y Fair Market Value
City		State	Zip Code	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		M D Y Fair Market Value
City		State	Zip Code	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		M D Y Fair Market Value
City		State	Zip Code	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		M D Y Fair Market Value
City		State	Zip Code	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 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)]