31-J-1
R.C. 3517.10

In-Kind Contributions Received

	4
Page	<u>'</u>

Prescribed by Secretary of State 03/05

Name of Committee in Full COMMITTEE TO ELECT JAMES MCG	REGOR	
Full Name of Contributor	Employer, Occupation, Labor Organization	zation* Registration Number, if PAC
CHRIS KATANYUTA	CREEKSIDE CAFE	
Street Address	Description of Item or Service	M D Y Fair Market Value
53 GRANVILLE STREET	FOOD	1 1 9 8 1 1 \$200.00
City GAHANNA	State Zip Code OH 43230	Received at Fundraising Event? O YES NO
Full Name of Contributor	Employer, Occupation, Labor Organia	
ZACK MCGREGOR	OSU HOSPITAL	Registation Patrices, it 1740
Street Address	Description of Item or Service	M D Y Fair Market Value
180 ACADEMY COURT	1 4' X 8' BANNER	1 0 3 1 1 1 \$138.78
City	State Zip Code	Received at Fundraising Event?
GAHANNA	OH 43230	O YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organia	Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
City	Stal te Zip Code OH	Received at Fundraising Event? O YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organia	
Street Address	Description of Item or Service	M D Y Fair Market Value
City	State Zip Code OH	Received at Fundraising Event? O YES NO
Full Name of Contributor	Employer, Occupation, Labor Organia	zation* Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
City	Stalte Zip Code OH	Received at Fundraising Event? O YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organiz	zation* 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? O YES NO
Full Name of Contributor	Employer, Occupation, Labor Organia	
Street Address	Description of Item or Service	M D Y Fair Market Value
City	State Zip Code	Received at Fundraising Event? O YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organiz	
Street Address	Description of Item or Service	M D Y Fair Market Value
City	Stal te Zip Code OH	Received at Fundraising Event? OYES O NO

Page Total \$338.78

^{*} 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)]