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## **In-Kind Contributions Received**

Form 31-J-1 R.C. 3517.10

Full Name of Committee							
Committe to Etect Kick for Mayor							
Full Name of Contributor		Employer, Occupation	n, Labor Organization*	Registration Number,	if PAC		
Steve little							
Street Address	Service		Date (MM/DD/YYYY) Fair Market Value				
10749 Eden Church	walking	alards/H	andouts	10.11.19	86.00		
City State Cip Code / Received at Fundraising Event?							
St. Louisville	u+ =	43071	☐ Yes YNo				
Full Name of Contributor  ANGELA KORK		Employer, Occupatio	n, Labor Organization*	Registration Number,	if PAC		
Street Address	Service		Date (MM/DD/YYYY) Fair Market Value				
4023 Fraves Dr.	T-Shirt	Purchase		8/28/19	180.00		
City State Zip Code Received at Fundrais			ng Event?				
Obetz	OH	43267 □ Yes 🚾					
Full Name of Contributor		Employer, Occupatio	n, Labor Organization*	Registration Number,	if PAC		
Street Address	Service		Date (MM/DD/YYYY)	Fair Market Value			
City	State	Zip Code	Received at Fundraisi	na Event?			
			☐ Yes ☐ No				
Full Name of Contributor	Employer, Occupatio	ion, 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	sing Event?			
			☐ Yes ☐ No				
Full Name of Contributor		Employer, Occupation, 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?			
<b>.</b>			☐ Yes ☐ No	-			

Page Total \$ 266.00	
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<sup>\*</sup> 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)]