In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full	 	· · · · · · · · · · · · · · · · · · ·			
Teater for Schools					
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Hilliard Education Association					
Street Address	Description of Item or Service		M D	Y Fair Market Value	
5491 Scioto Darby Road	Small Dog Printing mailing		1025		
City	State	Zip Code	Received at Funda	mising Event?	
Hilliard	OH	43026	Q YES O NO		
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Numb	ocr, if PAC	
J.D. Biros Street Address	Description of Item or Service			34 Ye : 37 3 37	
			0906	Y Fair Market Value 1 3 \$50.00	
2854 Wynneleaf		Website Development Staf te Zip Code		0 9 0 6 1 3 \$50.00	
Hilliard	๐๚ี	43026	i _		
Full Name of Contributor		pation, Labor Organization*	O YES O NO Registration Number, if PAC		
Street Address	Description of Ite	ern or Service	м р	Y Fair Market Value	
City	State	Zip Code	Received at Fundr	aising Event?	
	OH,		OYES	O NO	
Full Name of Contributor	Employer, Occu	pation, Labor Organization*	Registration Numb	per, if PAC	
		·-·-			
Street Address	Description of Ite	em or Service		Y Fair Market Value	
ct	Stal te	Zip Code	19	i i i i i i i i i i i i i i i i i i i	
City	OH Zip Code		Received at Fundraising Event?		
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Tur Name of Conditional	ішрюўсі, осси	patot, Dator Organization	TOGETH ROOM TABLE	Δ, 11 (ΑΕ	
Street Address	Description of Item or Service		м па	Y Fair Market Value	
City	Stal to	Zip Code	Received at Fundr	zising Event?	
	OH	OH		O YES O NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC		
		-			
Street Address	Description of Item or Service			Y Fair Market Value	
0:	Star te	7:- 0-1-	Received at Fundr	<u> </u>	
City	OH	Zip Code		_	
Full Name of Contributor			Registration Number, if PAC		
	Improyer, occupance, Labor Organization		registration Number, it FAC		
Street Address	Description of Item or Service		мпа	Y Fair Market Value	
City	Sta te	Zip Code	Received at Funds	aising Event?	
	ОН		O YES	О ио	
Full Name of Contributor	Employer, Occu	Employer, Occupation, Labor Organization*		ber, if PAC	
Street Address	Description of It	Description of Item or Service		Y Fair Market Value	
				<u></u>	
City	Stal to OH	Zip Code	Received at Funds	_	
	1 011	l .	OYES	Q ко	

Page Total \$550.00

^{*} 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)]