

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full Reynoldsburg Area Democrats PAC				
Full Name of Contributor Kristin Bryant	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 387 Cheyenne Way	Description of Item or Service Event Expense	M 0	D 9	Fair Market Value 72.36
City Reynoldsburg	State OH Zip Code 43068	Y 1	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Kristin Bryant	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 387 Cheyenne Way	Description of Item or Service Office Supplies	M 0	D 7	Fair Market Value 6.45
City Reynoldsburg	State OH Zip Code 43068	Y 0	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor Kristin Bryant	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 387 Cheyenne Way	Description of Item or Service Event Expense	M 0	D 8	Fair Market Value 57.01
City Reynoldsburg	State OH Zip Code 43068	Y 2	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor Kristin Bryant	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 387 Cheyenne Way	Description of Item or Service Advertisement	M 0	D 9	Fair Market Value 5.00
City Reynoldsburg	State OH Zip Code 43068	Y 2	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	Fair Market Value
City	State Zip Code	Y	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	Fair Market Value
City	State Zip Code	Y	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	Fair Market Value
City	State Zip Code	Y	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	Fair Market Value
City	State Zip Code	Y	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)]