Page	2_

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full							
Citizens for a Better Reynoldsbur			T				
Full Name of Contributor	1	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Capitol Citicom, Inc.		Print and Graphics		,			
Street Address	Description of Iter		M	D	Y	Fair Market Value	
2225 Citygate Dr Ste A	<u> </u>	Printing	0 9	111	1 4	783.50	
City	i i	Zip Code	Receive	d ax Fund	raising E	vent?	
Columbus, OH 43219-3651	$O \mid H$	43219-3651		YES		<u>√</u> %0	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization *		Registration Number, it PAC			
Street Address	Description of Iter	Description of Item or Service		D	Y	Fair Market Value	
City	State	Zip Code	I	d at Fund YES	raising E	NO	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
<u></u>						1	
Street Address	Description of Iter	n or Service	M	D	Y	Fair Market Value	
City	State	Zip Code	Receive	d at Fund	raising E	ven?	
	1 1			YES		□NO	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Street Address	Description of Iter	Description of Item or Service		D	Y	Fair Market Value	
· · · · · · · · · · · · · · · · · · ·	C	7:- C-A-	n	1 1 5 - 4	raising E	<u> </u>	
Ĉity	State	Zip Code	Keczive	YES	raising E	™NO	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Street Address	Description of Iter	Description of Item or Service		D	Y	Fair Market Value	
		a: a v	- - 	<u> </u>	1 . ! _	<u> </u>	
City	State	Zip Code	Kecewe		raising E		
		1		YES NO Registration Number, if PAC			
Full Name of Contributor	Employer, Occupa	tion, Labor Organization *	Kegistra	DOD MET	ider, if PA	AC .	
Street Address	Description of Iter	Description of Item or Service		D	Y	Fair Market Value	
City	State	Zip Code	Receive	d at Fund YES	raising E	vent?	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Street Address	Description of Iter	Description of Item or Service		D	Y	Fair Market Value	
City	State	Zip Code	Receive	d at Fund YES	raising E	ve±2? □NO	
Full Name of Contributor	Employer, Occupa	Employer, Occupation, Labor Organization *		Registration Number, if PAC			
Chanat Address	Description of the	Description of Item or Service		D	Y	Fair Market Value	
Street Address				1			
City	State	Zip Code	Receive	d at Fund YES	raising E	vend?	

Page Total \$	783.50
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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)]