In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Full		
Citizens for Jesse Thomas		
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Jesse L Thomas		
Street Address	Description of Item or Service	M D Y Fair Market Value
7874 Jonell Square	Filing Fee	1 2 1 6 1 5 \$80.00
City	Sta'te Zip Code	Received at Fundraising Event?
New Albany	OH 43054	OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	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? OYES NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	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?
	OH	OYES ONO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
City	State Zip Code	Received at Fundraising Event? OYES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
City	Sta te Zip Code OH	Received at Fundraising Event? O YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	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 O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
City	Sta te Zip Code OH	Received at Fundraising Event? O YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item or Service	M D Y Fair Market Value
City	Sta te Zip Code OH	Received at Fundraising Event? OYES O NO

Page Total

\$80.00

^{*} 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)]