## **In-Kind Contributions Received**



Prescribed by Secretary of State 03/05

Name of Committee in Full	· · · · · · · · · · · · · · · · · · ·	
Committee to Elect John Barno		
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
John C. Barno	Barno Law LLC	
Street Address	Description of Item or Service	M D Yi Fair Market Value
2710 Dale Ave	Candidate payment to Campaign	1 0 2 7 1 1 \$1,792.53
City	State Zip Code	Received at Fundraising Event?
Bexley	OH 43209	
Full Name of Contributor	Employer, Occupation, Labor Organization*	O YES O NO 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?
	OH	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 Yi Fair Market Value
City	State Zip Code	Received at Fundraising Event?
	OH	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	State Zip Code	Received at Fundraising Event?
	OH	Q 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	Stalte Zip Code	Received at Fundraising Event?
	OH_	O YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item or Service	Mr D Y Fair Market Value
City	Sta te Zip Code	Received at Fundraising Event?
	OH <sub>.</sub>	O YES O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Item or Service	Mi D Y Fair Market Value
C'a.	State Zip Code	Received at Fundraising Event?
City	Staj te Zip Code	
Full Name of Contributor	Employer, Occupation, Labor Organization	O YES O NO Registration Number, if PAC
run Name of Conditionol	Employer, Occupation, Labor Organization	Ingistation ( mark, it inc
Street Address	Description of Item or Service	M D Y Fair Market Value
City	State Zip Code OH	Received at Fundraising Event?  O YES  O NO

Page Total \$1,792.53

<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)]