



## **In-Kind Contributions Received**

Form 31-J-1 R.C. 3517.10

| Full Name of Committee                       |             |                             |   |                      |                             |                   |
|--|-------------|-----------------------------|---|----------------------|-----------------------------|-------------------|
| Friends of Barton Hacker                     |             |                             |   |                      |                             |                   |
| Full Name of Contributor                     |             |                             | Employer, Occupation, Labor Organization*                             |                      | Registration Number, if PAC |                   |
| In-Kind Contributions Received \$325 or less |             |                             |   |                      |                             |                   |
| Street Address                               | Description | on of Item or Se            | ervice  |                      | Date (MM/DD/YYYY)           | Fair Market Value |
| Me   |             | Neet & Greet                |   |                      | 10/12/2019                  | \$100.00          |
| City   |             | State                       | Zip Code Received at Fundrais   |                      | ng Event?                   |                   |
|  |             |                             |   | Yes X No             |                             |                   |
| Full Name of Contributor                     |             | TE                          | Employer, Occupation, Labor Organization*                             |                      | Registration Number, if PAC |                   |
| In-Kind Contributions Received \$325 or less |             |                             |   |                      |                             |                   |
| Street Address Descrip                       |             | ription of Item or Service  |   |                      | Date (MM/DD/YYYY)           | Fair Market Value |
|  | Web Si      | Web Site                    |   |                      | 09/24/2019                  | \$29.00           |
| City   | 1 5         | State                       | Zip Code  | Received at Fundrais | ing Event?                  |                   |
|  |             |                             |   | ☐ Yes 🕱 No           |                             |                   |
| Full Name of Contributor                     |             |                             | Employer, Occupation, Labor Organization* Registration Number, if PAC |                      |                             |                   |
| In-Kind Contributions Received \$325 or      | r less      |                             |   |                      |                             |                   |
| Street Address Descrip                       |             | cription of Item or Service |   |                      | Date (MM/DD/YYYY)           | Fair Market Value |
|  | Web Si      | ite                         |   |                      | 08/24/2019                  | \$29.00           |
| City   |             | State                       | Zip Code Received at Fundrais   |                      | ing Event?                  |                   |
|  |             |                             |   | ☐ Yes 🗵 No           |                             |                   |
| Full Name of Contributor                     |             |                             | Employer, Occupation, Labor Organization*                             |                      | Registration Number,        | if PAC            |
|  |             |                             |   |                      |                             |                   |
| Street Address Descript                      |             | iption of Item or Service   |   |                      | Date (MM/DD/YYYY)           | Fair Market Value |
|  |             |                             |   |                      |                             |                   |
| City   |             | State                       | Zip Code Received at Fundra   |                      | sing Event?                 |                   |
|  |             |                             |   | ☐ Yes 🕱 No           |                             |                   |
| Full Name of Contributor                     |             |                             | Employer, Occupation, Labor Organization*                             |                      | Registration Number, if PAC |                   |
|  |             |                             |   |                      |                             |                   |
| Street Address Descrip                       |             | otion of Item or Service    |   |                      | Date (MM/DD/YYYY)           | Fair Market Value |
|  |             |                             |   |                      |                             |                   |
| City   |             | State                       | Zip Code Received at Fundrais   |                      | ing Event?                  |                   |
|  |             |                             |   | ☐ Yes 🗵 No           |                             |                   |
|  |             |                             |   | <u> </u>             |                             |                   |

|               | 450.00 |  |
|---------------|--------|--|
|               | 158.00 |  |
| Page Total \$ |        |  |
|               |        |  |

<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)]