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In-Kind Contributions Received

Prescribed by Secretary of State 03/05

<u> </u>				
Name of Committee in Full Citizens for Boyd			-	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Kristine Gehring	zampoyer, occupanou, zance Organizacion		Registration	Nember, ii FAC
Street Address	Description of Item or Service		M D	Y _i Fair Market Value
706 Greenwich St	Food & Beverage; 9/6 Event			6 1 6 \$500.00
City	Stal te	Zip Code	Received at F	Fundraising Event?
Worthington	OH	43085	! O YES	O NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Shirley Boyd				
Street Address	Description of Item or Service		M D	Y Fair Market Value
4083 Easton Way	Food & Bev	erage; 9/6 Event	0 9 b	6 1 6 \$500.00
City	Sta te	Zip Code	Received at F	undraising Event?
Columbus	OH	43219	⊙ YES	ONO
Full Name of Contributor	Employer, Occupa	tion, Labor Organization*		Number, if PAC
Street Address	Description of Item or Service		M D	Y Fair Market Value
City	Sta te	Zip Code	Received at F	undraising Event?
	OH		OYES	O NO
Full Name of Contributor	Employer, Occupa	tion, Labor Organization*		Number, if PAC
•				.,
Street Address	Description of Item or Service		M, D	Y Fair Market Value
City	Sta te	Zip Code	Received at F	undraising Event?
	OH		OYES	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
Sacrification (Control of Control	Description of the	i di bu ilu		
City	Sta te	Zip Code	Received at I	undraising Event?
•	I он		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 _E Fair Market Value
City	Star te	Zip Code	Received at F	fundraising Event?
•	OH		O YES	O NO
Full Name of Contributor	Employer, Occupa	tion, Labor Organization*		Number, if PAC
		-		
Street Address	Description of Item or Service		M, D	Y Fair Market Value
City	Sta te	Zip Code	Received at F	Fundraising Event?
	OH I		OYES O NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Command Addition	Description of Item or Service		M Đ	Y ₁ Fair Market Value
Street Address	Sescription of then	i di Selvice		
City	Sta te	Zip Code	Received at I	Fundraising Event?
	ОН		OYES O NO	
		<u> </u>		

Page Total \$1,000.00

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)]