

In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full CITIZENS FOR RANKIN				
Full Name of Contributor Konan Pi	Employer, Occupation, Labor Organization * Liu Pon Xi	Registration Number, if PAC		
Street Address 8 E. Goodale Street	Description of Item or Service food, beverages	M 1	D 0	Fair Market Value 100.00
City Columbus	State O	Zip Code 43215	Y 0	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor Ron Levy	Employer, Occupation, Labor Organization * Parking Solutions	Registration Number, if PAC		
Street Address 850 Michigan Avenue	Description of Item or Service valet service	M 1	D 0	Fair Market Value 60.00
City Columbus	State O	Zip Code 43215	Y 0	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor Mark Dempsey	Employer, Occupation, Labor Organization * Franklin County	Registration Number, if PAC		
Street Address 1305 Westwood	Description of Item or Service Wire yard sign frames	M 1	D 2	Fair Market Value 390.00
City Columbus	State O	Zip Code 43212	Y 0	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Fair Market Value
City	State	Zip Code	Y	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Fair Market Value
City	State	Zip Code	Y	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Fair Market Value
City	State	Zip Code	Y	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Fair Market Value
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Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Fair Market Value
City	State	Zip Code	Y	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO

* Required for contributions from individual over \$100 to statewide and General Assembly candidates. If contributor is self-employed, occupation 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)]