In-Kind Contributions Received

Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full Committee to Re-Elect Shawn M. Cleary	-			
	1- / 0		In the state of th	
Full Name of Contributor Shawn M. Cleary	Employer, Occupation, Labor Organization* Self		Registration Number, if PAC	
Street Address	Description of Item or Service		M D Y Fair Market Value	
5147 Phillips Run	Signs - All Graphic Solutions		1 1 1 8 1 1 \$28.41	
City	State	Zip Code	Received at Fundraising Event?	
Canal Winchester	OH	43110	OYES O NO	
Full Name of Contributor	Employer, Occup	pation, Labor Organization*	Registration Number, if PAC	
Shawn M. Cleary	- }			
Street Address	Description of Item or Service		M D Y Fair Market Value	
5147 Phillips Run	Cols. Messenger Ad		1 0 B 1 1 1 \$334.30	
City	Sta te	Zip Code	Received at Fundraising Event?	
Canal Winchester	_ OH	43110	OYES ONO	
Full Name of Contributor	Employer, Occu	pation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Ite	em or Service	M D Y Fair Market Value	
City	Sta te	Zip Code	Received at Fundraising Event?	
	OH		O YES O NO	
Full Name of Contributor	Employer, Occu	pation, Labor Organization*	Registration Number, if PAC	
Turriant of Controllor				
Street Address	Description of Ite	em or Service	M D Y Fair Market Value	
City	Sta te	Zip Code	Received at Fundraising Event?	
	OH		OYES O NO	
Full Name of Contributor	Employer, Occu	pation, 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?	
City	OH			
Full Name of Contributor		pation, Labor Organization*	O YES O NO Registration Number, if PAC	
Full Name of Constitution	Limpioyer, Occu	parion, Edon Organization		
Street Address	Description of It	em or Service	M D Y Fair Market Value	
City	Sta te	Zip Code	Received at Fundraising Event?	
1	OH		O YES O NO	
Full Name of Contributor		pation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service		M: D Y Fair Market Value	
City	State OH	Zip Code	Received at Fundraising Event? O YES O NO	
Full Name of Contributor	Employer, Occi	upation, Labor Organization*	Registration Number, if PAC	
Street Address	Description of Item or Service		M. D. Y. Fair Market Value	
City	Stal te OH	Zip Code	Received at Fundraising Event? OYES O NO	

Page Total \$362.71

^{*} 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)]