

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full <u>Citizens for Southwestern City Schools</u>			
Full Name of Contributor <u>Phil Warner</u>		Employer, Occupation, Labor Organization*	
Street Address <u>1148 Heather Run</u>		Description of Item or Service <u>Postage</u>	
City <u>Wilmington</u>		State <u>OH</u>	Zip Code <u>45177</u>
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value <u>\$440.-</u>
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor <u>Ohio Association of Public School Employees</u>		Employer, Occupation, Labor Organization*	
Street Address <u>6805 Oak Creek Dr</u>		Description of Item or Service <u>GOTV calls</u>	
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43229</u>
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value <u>\$221.12</u>
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor <u>Ohio Association of Public School Employees</u>		Employer, Occupation, Labor Organization*	
Street Address <u>6805 Oak Creek Dr</u>		Description of Item or Service	
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43229</u>
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value <u>\$8413.00</u>
		Received at Fundraising Event? <input type="radio"/> YES <input checked="" type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State <u>OH</u>	Zip Code
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State <u>OH</u>	Zip Code
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State <u>OH</u>	Zip Code
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization*	
Street Address		Description of Item or Service	
City		State <u>OH</u>	Zip Code
		Registration Number, if PAC	
		M	D
		Y	Fair Market Value
		Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> NO	

* 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)]