

# In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Berry For Grove City</b>				
Full Name of Contributor <b>Scott Perry</b>	Employer, Occupation, Labor Organization * <b>Public Safety</b>	Registration Number, if PAC		
Street Address <b>3311 Summer Glenn Drive</b>	Description of Item or Service <b>Banners</b>	M <b>0</b>	D <b>9</b>	Fair Market Value <b>650.00</b>
City <b>Grove City</b>	State <b>o</b>	Zip Code <b>43123</b>	Y <b>1</b>	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Full Name of Contributor <b>Jo Berry</b>	Employer, Occupation, Labor Organization * <b>Retired</b>	Registration Number, if PAC		
Street Address <b>4591 Country Lane</b>	Description of Item or Service <b>balloons</b>	M <b>0</b>	D <b>9</b>	Fair Market Value <b>200.00</b>
City <b>Wooster</b>	State <b>o</b>	Zip Code <b>44691</b>	Y <b>1</b>	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
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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 individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the 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 appear. [R.C. 3517.10(B)(4)]