 Page	 	

In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full								
Berry For Grove City								
Full Name of Contributor	Employer, Occ	Employer, Occupation, Labor Organization *			Registration Number, if PAC			
Scott Perry		Public Safety						
Street Address		Description of Item or Service		Ð	Y	Fair Market Value	,	
3311 Summer Glenn Drive		Banners		1 1	111		650.00	
City	State	Zip Code			draising			
Grove City	o h	43123	l	rES	-	×ω		
Full Name of Contributor		upation, Labor Organization *	Registra	ation Nu	mber, if I			
fo Berry	ľ	Retired						
Street Address	Description of	Item or Service	М	D	Y	Fair Market Value	;	
4591 Country Lane	!	balloons	0 9	0 1	1 1		200.00	
City	State	Zip Code			draising			
Wooster	o i h	44691	1 L	YES		⊠•		
Full Name of Contributor	Employer, Occu	Employer, Occupation, Labor Organization *			Registration Number, if PAC			
Street Address	Description of I	Item or Service	M	D	Y	Fair Market Value		
City	State	Zip Code	Receive	d at Fun rES	draising	Event?		
Full Name of Contributor	Employer, Occu	upation, Labor Organization *	Registra	ition Nur	mber, if f	PAC		
Street Address	Description of t	Item or Service	М	D	Y	Fair Market Value		
City	State	Zip Code	Receive	d at Fun YES	draising	Event?		
Full Name of Contributor	Employer, Occu	upation, Labor Organization *	Registra	tion Nur	nber, if F	AC		
Street Address	Description of I	Item or Service	M	Ď	Y	Fair Market Value		
City	State	Zíp Code	Receive	at Fund	draising (Event?		
Full Name of Contributor	Employer, Occu	pation, Labor Organization *	Registra	tion Nur	nber, if P	AC	7	
Street Address	Description of It	tem or Service	M	D 	Y	Fair Market Value		
City	State	Zíp Code	Receive	at Fund	draising E	vent?		
Full Name of Contributor	Employer, Occu	pation, Labor Organization *	Registra	tion Nun	nber, if P	AC		
Street Address	Description of It	tem or Service	М	0	Y	Fair Market Value		
City	State	Zip Code	Received	at Func YES	draising E	vent?		
Full Name of Contributor	Employer, Occu	pation, Labor Organization *	Registra	tion Nun	nber, if P.	AC		
Street Address	Description of It	tem or Service	M	D	Y	Fair Market Value		
City	State	Zip Code		at Func YES	draising E	vent?		

Page Total \$	850.00

^{*} 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)]