



## **In-Kind Contributions Received**

Form 31-J-1 R.C. 3517.10

Full Name of Committee							
Friends For Sean Demaree						3	
Full Name of Contributor			Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Sean C Demaree							
Street Address Description of Item or			Service		Date (MM/DD/YYYY)	Fair Market Value	
313 Highland Ave	Campa	aign info card	ds		11/01/2017	91.38	
City	State		Zip Code Received at Fundraisi		ng Event?		
Worthington		ОН	43085	☐ Yes 🗷 No			
Full Name of Contributor			Employer, Occupatio	n, Labor Organization*	Registration Number,	f PAC	
Street Address	Descrip	tion of Item or S	or Service		Date (MM/DD/YYYY)	Fair Market Value	
City		State	Zip Code	Received at Fundraisin	ng Event?		
Full Name of Contributor			Employer, Occupation, Labor Organization* Registration Number, if PAC		f PAC		
Street Address	Descrip	tion of Item or S	Service		Date (MM/DD/YYYY)	Fair Market Value	
City State		State	Zip Code	Received at Fundraisi			
Full Name of Contributor			Employer, Occupatio	n, Labor Organization* Registration Number, if PAC			
Street Address	Descrip	tion of Item or S	Date (MM/DD/YYYY) Fair Market Va		Fair Market Value		
City		State	Zip Code	Received at Fundraisi	ng Event?		
Full Name of Contributor			Employer, Occupation, Labor Organization*		Registration Number,	if PAC	
Street Address	Description of Item or		Service		Date (MM/DD/YYYY)	Fair Market Value	
City State		Zip Code	Received at Fundraisi	ing Event?			

\* 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)]

e  Page Total	91.38	