31-J-1 R.C. 3517.10

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|  | Presented by Secretary of State 03/05  |                                       |
|--|--|---------------------------------------|
| Name of Committee 12 Full  |  |                                       |
| Citizens to Re-Elect Amy Salay   |  |                                       |
| Full Name of Contributor   | Employer, Occupation, Labor Organization*  | Registration Number, if PAC           |
| Amy Salay  |  |                                       |
| Street Address   | Description of Item or Service   | M D Y Fair Market Value               |
| 5789 Gaellc Ct   | Re-Election Signs (Previously us   | ed) 1 0 0 5 1 3 \$275.00              |
| Ciry   | State Zip Code   | Roccived at Fundraising Event?        |
| Dublin   | OH 43016   | DYES O NO                             |
| Full Name of Contributor   | Employer, Occupation, Labor Organization   | Registration Number, if PAC           |
|  |  |                                       |
| Street Address   | Description of Item or Service   | M D Y Fair Market Value               |
|  |  |                                       |
| City   | State Zip Code   | Received at Fundraising Event?        |
|  | OH   | QYES Q NO                             |
| Full Name of Contributor   | Employer, Occupation, Labor Organization*  | Registration Number, if PAC           |
|  |  |                                       |
| Street Address   | Description of Item or Service   | M D Y Feir Market Value               |
|  |  |                                       |
| City   | State Zip Code   | Roceived at Fundraising Event?        |
| T  | OH   | OYES ONO                              |
| Full Name of Contributor   | Employer, Occupation, Labor Organization*  | Registration Number, if PAC           |
|  |  | 1                                     |
| Street Address   | Description of Item or Service   | M D Y Fair Market Value               |
|  |  |                                       |
| City   | Sta'te Zip Corle   | Received at Fundraising Event?        |
|  | ОН   | OYES ONG                              |
| Full Name of Contributor   | Employer, Occupation, Labor Organization   | Regulation Number, if PAC             |
|  |  |                                       |
| Street Address   | Description of Item or Service   | M. D. Y. Fair Market Value            |
|  |  |                                       |
| City   | State Zip Code   | Received at Fundraising Event/        |
|  | OH   | 1_                                    |
| Full Name of Contributor   | Employer, Occupation, Labo: Organization*  | OYES O NO Registration Number, if PAC |
| The state of the s |  |                                       |
| Street Address   | Description of Item or Service   | M D Y Fair Market Value               |
|  |  |                                       |
| City   | Sta' to Zip Code   | Received at Fundraising Event?        |
|  | OH   |                                       |
| Full Name of Contributor   | Employer, Occupation, Labor Organization*  | Registration Number, if PAC           |
| E Late Mattic Or Combitation   | Engleya, occupant can rigarization   |                                       |
| Street Address   | Description of Item or Service   | M D Y Fair Market Value               |
| ances varies   | issorption of real or so view  |                                       |
| £  | Contract Con | Received at Fundraising Event?        |
| Chy  | Sizi to Zip Code OH  |                                       |
| <b>1</b>   |  | OYES ONO                              |
| Full Name of Contributor   | Employer, Occupation, Labor Organization*  | Registration Number, if PAC           |
| 36   | Decision of the second   | M D Y: Fair Market Value              |
| Street Address   | Description of Item or Service   | the transfer white                    |
|  | - 190 - C. J.  | B. in dat Probability For all         |
| City   | State Zip Coule OH   | Received at Fundraising Event?        |
|  | Un.  | OYES O NO                             |

<sup>\*</sup> 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)]