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In-Kind Contributions Received

Prescribed by Secretary of State 3/05

No				
Name of Committee in Full Citizens for Priscilla Tyson				
Full Name of Contributor	Employer Occu	motion I show Occanization •	Registration Number, if PAC	
Friends for Ginther	Employer, Occupation, Labor Organization *		registration (viante), ii FAC	
Street Address	Description of Item or Service		M D Y Fair Market Value	
545 East State Street	Media Buy		0 4 2 2 1 3 13,319.38	
City	State Zip Code		Received at Fundraising Event?	
Columbus	O H	43215	YES ☑NO	
Full Name of Contributor	Employer, Occu	pation, Labor Organization *	Registration Number, if PAC	
Friends for Ginther				
Street Address	Description of Item or Service		M D Y Fair Market Value	
545 East State Street		dvertisement	0 4 2 3 1 3 1,134.30	
Columbus	State	Zip Code	Received at Fundraising Event?	
Columbus Full Name of Contributor	O H	43215	YES VNO	
Friends for Ginther	Employer, Occu	Employer, Occupation, Labor Organization * Registration Number, if PAC		
Street Address	Description of I	tem or Service	M D Y Fair Market Value	
545 East State Street	Radio Time		0 4 2 5 1 3 1,607.33	
City	State	Zip Code	Received at Fundraising Event?	
Columbus	0 + H	43215	☐ YES ☑NO	
Full Name of Contributor	Employer, Occu	pation, Labor Organization *	Registration Number, if PAC	
Friends for Ginther				
Street Address	Description of I		M D Y Fair Market Value	
545 East State Street		<u> Mailer</u>	0 4 2 9 1 3 5,119.04	
City	State	Zíp Code	Received at Fundraising Event?	
Columbus Full Name of Contributor	O H	43215	YES VNO Registration Number, if PAC	
Friends for Ginther	Employer, Occu	panon, Labor Organization	Registration Number, it FAC	
Street Address	Description of I	tem or Service	M D Y Fair Market Value	
545 East State Street		aphic Design	0 4 2 9 1 3 71.17	
City	State	Zip Code	Received at Fundraising Event?	
Columbus	lo I H	43215	☐ YES ☑ NO	
Full Name of Contributor	Employer, Occu	pation, Labor Organization *	Registration Number, if PAC	
Friends for Ginther	<u> </u>			
Street Address	Description of Item or Service		M D Y Fair Market Value	
545 East State Street		Production	0 4 3 0 1 3 3,381.16	
City	State	Zip Code	Received at Fundraising Event?	
Columbus	OIH		YES VNO	
Full Name of Contributor	Employer, Occu	pation, Labor Organization *	Registration Number, if PAC	
Street Address	Description of Item or Service		M D Y Fair Market Value	
Succe Address	Description of item or service			
City	State	Zip Code	Received at Fundraising Event?	
[,			YES NO	
Full Name of Contributor	Employer, Occu	pation, 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?	
1		1	YES 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)]