



In-Kind Contributions Received

11.25

Page Total \$

Form 31-J-1 R.C. 3517.10

Full Name of Committee Citizens for a Stronger Gahanna						
Full Name of Contributor	Employer, Occur	Employer, Occupation, Labor Organization* Registration Number, if PAC				
Brian Metzbower		Gahanna City Council				
Street Address Description of Item of		L		Date (MM/DD/YYYY)	Fair Market Value	
734 Park Court	Text Announcements			11/05/2018	ļ	
City	State	Zip Code	Received at Fundraisi	at Fundraising Event?		
Gahanna OH		43230	☐ Yes 区 No			
Full Name of Contributor		Employer, Occup	pation, Labor Organization*	abor Organization* Registration Number, if PAC		
Street Address	Description of Item or		or Service		Fair Market Value	
City	State	Zip Code	Received at Fundraisi	ing Event?		
•		}	☐ Yes ☐ No			
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 Fundrais	ng Event?		
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Street Address	Description of Item	n or Service	Service		Fair Market Value	
City	State	Zip Code	Zip Code Received at Fundraising Event?		<u></u>	
			☐ Yes ☐ No			
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	Zip Code Received at Fundraising Event?			
		☐ Yes ☐ No				
* Required for contributions from individuals over of the individual's business, if any, rather than em \$100, the labor organization of which the employe	ployer should be list	ed. If two or more emp	oloyees contribute via payro	self-employed, the occi all deduction and exceed	upation and name of the aggregate of	