## **In-Kind Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full						
Carpenters Local Ur	ion d	DO PCE				
Full Name of Contributor	Employer, Occup	Registration Number, if PAC				
Street Address	Description of Item or Service		M	D	Y	Fair Market Value
City	Sta te	Received at Fundraising Event?				
Full Name of Contributor	Employer, Occup	Registration Number, if PAC				
Street Address	Description of Item or Service		M	D	Y	Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?			
Full Name of Contributor	Employer, Occupa	ation, Labor Organization*	Registration Number, if PAC			
Street Address	Description of Item	a or Service	M	D	ì	Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?			
Full Name of Contributor	Employer, Occupa	ttion, Labor Organization*	Registration Number, if PAC			
Street Address	Description of Item or Service		M	D	Y	Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?			
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC			
Street Address	Description of Item or Service		M	Đ	)	Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?			
Full Name of Contributor	Employer, Occupation, Labor Organization* Registration Number, if PAC				AC	
Street Address	Description of Item or Service		M	D	Y	Fair Market Value
City	Sta te	Zip Code	Received TYES		•	Event? NO
Full Name of Coutributor	Employer, Occupation, Labor Organization		Registration Number, if PAC			
Street Address	Description of Item or Service		M	D	Ĭ	Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?  PYES PNO			
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	Sta te	Zip Code	j	Received at Fundraising Event?  Signal YES Signal NO		

Page Total \$ \_\_\_\_\_

<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)]