



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee Committee For Perry Township				
Full Name of Contributor John Petrozzi		Employer, Occupation, Labor Organization* Perry Township - Police Chief		Registration Number, if PAC
Street Address 667 Big Rock Drive		Description of Item or Service Levy Flyers		Date (MM/DD/YYYY) Fair Market Value 11/08/2019 \$44.00
City Westerville	State OH	Zip Code 43082	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Kenneth S. Cesaro		Employer, Occupation, Labor Organization* Perry Township - Police LT		Registration Number, if PAC
Street Address 1533 Rayne Lane		Description of Item or Service Levy Flyers		Date (MM/DD/YYYY) Fair Market Value 11/08/2019 \$44.00
City Columbus	State OH	Zip Code 43220	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Ian Warren		Employer, Occupation, Labor Organization* Perry Township-Superintendent		Registration Number, if PAC
Street Address 1803 Ashburn Drive		Description of Item or Service Levy Flyers		Date (MM/DD/YYYY) Fair Market Value 11/08/2019 \$44.00
City Delaware	State OH	Zip Code 43015	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor N/A		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address		Description of Item or Service		Date (MM/DD/YYYY) Fair Market Value
City	State OH	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor N/A		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address		Description of Item or Service		Date (MM/DD/YYYY) Fair Market Value
City	State OH	Zip Code	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

* 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)]

Page Total \$ \$132.00