## **In-Kind Contributions Received**

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Prescribed by Secretary of State 03/05

Name of Committee in Full  RURK FOR COUNCIL								
Full Name of Contributor	Employer, Occupat	ion, Labor Organization*	Registration Number, if PAC					
Street Address V Graves Dr	Description of Item	or Service	07/21/3 Fair Market Value 254.13					
Columbus	() <sup>s</sup> #	Zip Code 43207	Received at Fundraising Event?					
Full Pame of Contributor HNOSHIA KLEIC	Employer, Occupat	ion, Labor Organization*	Registration Number, if PAC					
Street Address 3 Graves Sr.	Description of lieur	gr Service encels	M D P Y Fair Market Value 40.32					
cii Columbus	Sta te.	43 20-7	Received at Fundraising Event?  U YES NO					
Full Name of Contributor	Employer, Occupat	ion, Labor Organization*	Registration Number, 'tf FAC					
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, Occupat	ion, 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, Occupat	ion, 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, Occupat	cion, Labor Organization*	Registration Number, if PAC					
Street Address	Description of Item	or Service	M	Đ	Y	Fair Market Value		
City	Sta te	Zip Code	Received YES		_	Event?		
Full Name of Contributor	Employer, Occupa	tion, Labor Organization*	Registration Number, if PAC					
Street Address	Description of Item or Service		ME	D	Ϋ́	Fair Market Value		
Cuy	Sta te	Zip Code	Received at Fundraising Event?  YES  NO					
Full Name of Contributor	Employer, Occupa	tion, 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?  ☐ YES ☐ NO							

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<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)]