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In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full				
MASTERS FOR TRUET	-0.0			
Full Name of Contributor	Employer Occupation Labor Occupations		In the second	
N A	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
Street Address	Description of Item or Service		MID	Yi Fair Market Value
				The state of the s
City	Sta te	Zip Code	Received at Fun	draising Event?
			I YES I NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
N/P			!	
Street Address	Description of Item or Service		M D	Y Fair Market Value
City	State Zip Code		Received at Fundraising Event?	
,			I YES	I NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
N/A				
Street Address	Description of Item or Service		M D	Yı Fair Market Value
City	Sta te	Zip Code	Received at Fun	draising Event?
				•
Full Name of Contributor	I Employer Occi	upation, Labor Organization*	I YES Registration Nur	I NO
N/A			Tregistration real	mod, it the
Street Address	Description of Item or Service		M D	Yi Fair Market Value
City	Sta te	Zip Code	Received at Fun	draising Event?
			I YES I NO	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
NIA			i	
Street Address	Description of Item or Service		M D	Y Fair Market Value
City	Sta te	Zip Code	Received at Fun	draising Event?
			I YES	I NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
NA				
Street Address	Description of Item or Service		M D	Y Fair Market Value
City	Sta' te	Zip Code	Received at Fun	draising Event?
			I YES	I NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
N/A		•		
Street Address	Description of I	tem or Service	M D	Yi Fair Market Value
City	Sta te	Zip Code	Received at Fun	draising Event?
•				
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC	
N/A	Employer, occupation, Euror Organization			
Street Address	Description of Item or Service		M D	Y Fair Market Value
City	State	Zip Code	Received at Fun	draising Event?
			1 YES	I NO

Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, occupation 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)}