In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full			
Citizens For Corbin			
D.H.M. Co. of house	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address			
Street Address	Description of Item or Service		M D Y Fair Market Value
4460 HOBYEN 10008	Description of Item or Service Vin Y Sta te Zip Code (12)		11/3/11/11/11/11/11/11/11/11/11/11/11/11
city Grove City	Sta te	Zip Code 43/23	Received at Fundraising Event?
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC
K. Susam Condour			
Street Address	Description of Item or Service		M D Y Fair Market Value
4460 Hower Road	Congress	Sip Code: 3/23	M D V Fair Market Value
city Grove City	State	Zip Code,	Received at Fundraising Event?
Full Name of Contributor	Employer Occupat	ion, Labor Organization*	☐ YES NO Registration Number, if PAC
16. Sussicarby	Supply -1, Overhadori, Smoot Or Summittee		
Street Address	Description of Item		M D Y Fair Market Value
Acordo Varal 6024	Como	Zip Code 23	M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?
Grove City		ion, Labor Organization*	☐ YES SK NO Registration Number, if PAC
Full Name of Contributor	empioyer, Occupat	ion, rapor Organization.	regionation removes, it rac
Street Address	Description of Item	or Service T- Stylets	M D Y Fair Market Value
44 60 1/conser force	Selecte	28 m # 44 82	111 2111 4513
city 61000 City	Sta te	Zip Code	Received at Fundraising Event?
Full Name of Contributor	2		YES ENO Registration Number, if PAC
Hull Name of Contributor	Employer, Occupation, Labor Organization*		
Street Address	Description of Item or Service		M D Y Fair Market Value
4460 Kennes Porch	F308-	- Staffing made	11/2/11/ 40
ICIV	Sta te	Zip Code	Received at Fundraising Event?
Full Name of Contributor		ion, Labor Organization*	Registration Number, if PAC
	Employer, Occupat	ion, Lauri Organization	ingiauduu ruuuwi, u rac
Street Address	Description of Item		M D Y Fair Market Value
ALCOLOGIC Roses		control taker	11121111 616
City Grove Chy	State	Zip Code	Received at Fundraising Event?
Full Name of Contributor		tion, Labor Organization*	YES ElkNO Registration Number, if PAC
LAKET C. CONSTONE	_mproy sis o coupui		_
Street Address	Description of Item or Service		M D Y Fair Market Value
Local rough od pp	ENORISE		11/30/11/2011
City Carbon o Cobre	Sta te	Zip Code	Received at Fundraising Event? U YES W NO
Full Name of Contributor	Employer, Occupat	tion, Labor Organization*	Registration Number, if PAC
midree of property		<u> </u>	
Street Address ALGO MANGER NOCH	Description of Item or Service		M D Y Fair Market Value
City	Sta te	Zip Code	Received at Fundraising Event?
Color of the	OH	V3103	☐ YES

Page Total \$4,770 50

^{*} 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)]