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In-Kind Contributions Received

Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full						
	NOEW	BRUSK				
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC			
BRUSK & BRUSK ATTORNEYS						
Street Address	Description of Item	or Service	M	D	Y	Fair Market Value
1861 CROSSWICK COURT	ENVELOPES, STAMPS, PAPER		04	01	1 5	61.00
City			Received at Fundraising Event?			
REYNOLDSBURG	State Zip Code OH 43068		□ YES 🕱 NO			
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		Received at Fundraising Event?			
			□ YES □ NO			
Full Name of Contributor	Employer, Occupat	ion, Labor Organization*	Registration Number, if PAC			
Street Address	Description of Item	or Service	M	P	Y	Fair Market Value
City					Ш.	
City	State	Zip Code	Received		iraising i	Event?
Full Name of Contributor	Empleyed Ore	<u> </u>	☐ YES			NO
Pair Name of Conditions	Employer, Occupat	ion, Labor Organization*	Registrat	ien Nun	iber, if P	AC
Street Address	Description of Item	or Comito	1.4	- N	ਾ ਹ	Fair Market Value
and many	Description of item	or pervice	M	۱٦	'	Fait Market value
City	Sta te	Zip Code	Received	at Fund	Inising I	Event?
			ł		_	
Full Name of Contributor	Employer, Occupat	ion, Labor Organization*	Registrat			NO AC
Street Address	Description of Item or Service		Μŧ	D	M	Fair Market Value
]					
City	Sta to	Zip Code	Received	at Fund	raising !	Event?
			□ YES	5		NO
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC			
Street Address	Description of Item or Service		М	P	Y	Fair Market Value
City	Sir	17: 6:4	I I	10.5	1	<u> </u>
cny	Sta te	Zip Code	Received		•	
Full Name of Contributor	Employer Occupat	ion, Labor Organization*	Registra			NO PAC
	Jampio, at, Cocupat	wasse distinguish				
Street Address	Description of Item	or Service	M	D	T YI	Fair Market Value
	, , , , , , , , , , , , , , , , , , , ,					
City	Sta te	Zip Code	Receive	at Fun	Iraising	Event?
		-	O YES		_	
Full Name of Contributor	Employer, Occupation, Labor Organization*		Registration Number, if PAC			
Street Address	Description of Item or Service		М	D	Y	Fair Market Value
City	Sta te	Zip Code	Receive	d at Fun	draising	Event?
			☐ YE	S		NO

Page Total \$ 61.00

^{*} 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)]