

In-Kind Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full PALEY FOR COLUMBUS			
Full Name of Contributor Sam & Gigi Fried	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 2346 South Parkview	Description of Item or Service Food & Beverages		M D Y Fair Market Value 0 6 2 4 0 9 \$300.00
City Columbus	State OH	Zip Code 43209	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor Tom Selvaggio	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 9797 Haverford P. N.	Description of Item or Service Food & Beverages		M D Y Fair Market Value 0 2 1 9 0 9 \$421.88
City Pickerington	State OH	Zip Code 43147	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> NO
Full Name of Contributor Mike Ambrose	Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 3392 Watersilk Ct.	Description of Item or Service Beverages		M D Y Fair Market Value 0 7 2 3 0 9 \$100.00
City Columbus	State OH	Zip Code 43221	Received at Fundraising Event? <input checked="" type="radio"/> YES <input type="radio"/> 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	State OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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	State OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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	State OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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	State OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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	State OH	Zip Code	Received at Fundraising Event? <input type="radio"/> YES <input type="radio"/> 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 **\$821.88**