31-J-1 R.C. 3517.10

## **In-Kind Contributions Received**

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Page	

Prescribed by Secretary of State 03/05

Name of Committee in Full  CHIZENS ST FILM								
Full Name of Contributor								
Steven Bernett	Employer, Occupa	Registration Number, if PAC						
Street Address	Description of Item	or Service	М	D)	Ŋ	Fair Market Value		
1800 House Minne	Dlastin	c Bags for	ෆු ඉ	da	16	170,95		
City /	Sta te	Zip Code	Receive	d at Fund	raising E			
Vouse city	04 43123			☐ YES SNO				
Full Name of Contributor	Employer, Occupat	tion, Labor Organization*	Registration Number, if PAC					
Stroet Address	Description of House	M Frieddicker						
5354 Thornhill ct	Description of Item	М О	da	15	Fair Market Value			
City	Sta te	Received at Fundraising Event?						
crove al	04	43153	☐ YES	S	⋝	<b></b> ₹0		
Full Name of Contributor	Employer, Occupat	Registration Number, if PAC						
Street Address	Description of Item	M	D	Y	Fair Market Value			
City	Sta te	Zip Code	Receive	d at Fund	raising E	vent?		
			□ YES		П	NO		
Full Name of Contributor	Employer, Occupation, Labor Organization*			Registration Number, if PAC				
O. A. M.	25 ( 27 ( 27 )				<del></del>			
Street Address	Description of Item or Service		M	וט	Y	Fair Market Value		
City	Sta te	Zip Code	Received	at Fund	raising E	vent?		
		☐ YES ☐ NO						
Full Name of Contributor	Employer, Occupat	Registration Number, if PAC						
Street Address	Description of Item	M	D	Y	Fair Market Value			
Cit.		7:- 0- 1-	10					
City .	Sta to	Zip Code	Received at Fundraising Event?					
Full Name of Contributor	Employer, Occupation, Labor Organization*		☐ YES ☐ NO					
Pull Name of Controllor	Emproyer, Occupan	Registration Number, if PAC						
Street Address	Description of Item or Service		М	D	Y	Fair Market Value		
<u> </u>		1						
City	Sta te	Zip Code	Received		_			
Full Name of Contributor	Employer, Occupat	YES NO						
i us ivanie of Communo.	елирюует, Оссират	Registration Number, if PAC						
Street Address	Description of Item or Service		M	D	Y	Fair Market Value		
City	Sta te	Received at Fundraising Event?						
Fall Name of Contribution	Constant Const	☐ YES ☐ NO						
Full Name of Contributor	Employer, Occupat	Employer, Occupation, Labor Organization*			Registration Number, if PAC			
Street Address	Description of Item	M	D	Y	Fair Market Value			
City	Sta te	Zip Code	Received	ai Fundi	aising E	vent?		
			☐ YES	;		NO		

Page Total \$ 17095

<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)]