

# In-Kind Contributions Received

Prescribed by Secretary of State 3/05

Name of Committee in Full <b>Citizens for Jolley</b>			
Full Name of Contributor <b>Heather Bishoff</b>		Employer, Occupation, Labor Organization * <b>Bishoff Financial Group</b>	
Street Address <b>2902 Braden Way</b>		Registration Number, if PAC	
City <b>Blacklick</b>		Description of Item or Service <b>Printing</b>	
State <b>OH</b>		M   D   Y   Fair Market Value <b>1   1   0   4   1   1   38.49</b>	
Zip Code <b>43004</b>		Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor <b>Heather Bishoff</b>		Employer, Occupation, Labor Organization * <b>Bishoff Financial Group</b>	
Street Address <b>2902 Braden Way</b>		Registration Number, if PAC	
City <b>Blacklick</b>		Description of Item or Service <b>Postage</b>	
State <b>OH</b>		M   D   Y   Fair Market Value <b>1   1   0   4   1   1   58.96</b>	
Zip Code <b>43004</b>		Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Registration Number, if PAC	
City		Description of Item or Service	
State		M   D   Y   Fair Market Value	
Zip Code		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Registration Number, if PAC	
City		Description of Item or Service	
State		M   D   Y   Fair Market Value	
Zip Code		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Registration Number, if PAC	
City		Description of Item or Service	
State		M   D   Y   Fair Market Value	
Zip Code		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Registration Number, if PAC	
City		Description of Item or Service	
State		M   D   Y   Fair Market Value	
Zip Code		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Registration Number, if PAC	
City		Description of Item or Service	
State		M   D   Y   Fair Market Value	
Zip Code		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor		Employer, Occupation, Labor Organization *	
Street Address		Registration Number, if PAC	
City		Description of Item or Service	
State		M   D   Y   Fair Market Value	
Zip Code		Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	

\* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the 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 appear. [R.C. 3517.10(B)(4)]