



In-Kind Contributions Received

Form 31-J-1 R C 3517 10

Full Name of Committee							
Supporters of Sam Shim							
Full Name of Contributor			Employer, Occupation, Labor Organization*		Registration Number, if PAC		
Citizens for Daley							
Street Address	ess Description of Item		or Service		Date (MM/DD/YYYY)	Fair Market Value	
852 Highview Dr	Campa	Campaign Literature 12				110.82	
City		State	Zip Code	Code Received at Fundraising Event?			
Columbus		ОН	43235	Yes X No	⋉ No		
Full Name of Contributor			Employer, Occupation, Labor Organization* Registration Number, if PAC				
					Date (MM/DD/YYYY)		
Street Address	Description of Item or			Service		Fair Market Value	
City		State	Zip Code	Received at Fundraisi	ng Event?		
		ОН		☐ Yes 🕱 No			
Full Name of Contributor			Employer, Occupation, Labor Organization* Registration Number, if PAC				
Street Address	Description of Item or Se		Service		Date (MM/DD/YYYY)	Fair Market Value	
		State	Zip Code	Received at Fundraisi	ising Event?		
		ОН		☐ Yes 🕱 No			
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City		State	Zip Code	Received at Fundraisi	ng Event?		
		ОН		Yes X No			
Full Name of Contributor			Employer, Occupation, Labor Organization*		Registration Number,	if PAC	
Street Address Description of Item o		ion of Item or S	Service		Date (MM/DD/YYYY)	Fair Market Value	
City		State	Zip Code	Received at Fundraisi	ng Event?		
		ОН		☐ Yes 🗷 No			
	1.						

* 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)]

	110.82	
	110.02	
Page Total \$		
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