In-Kind Contributions Received

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Prescribed by Secretary of State 03/05

Name of Committee in Fail S COMMITTEE		<u> </u>	
	Employer Com-	tion Labor Organization*	Registration Number, if PAC
OHIO ASSOCIATION OF PUBLIC SCH	Employer, Occupation, Labor Organization* AFL-CIO		Registration Number, if PAC PAC LA 1269 M. D. Y. Fair Market Value
Street Address 6805 OAK CREEK DRIVE	MAILER	or Service	0 4 3 0 1 5 492.40
COLUMBUS	OH Starte	Zip Code 43229	Received at Fundraising Event? O YES NO
Full Name of Contributor OHIO ASSOCIATION OF PUBLIC SCH	AFL-CIO	ntion, Labor Organization*	Registration Number, if PAC PAC LA 1269
Street Address 6805 OAK CREEK DRIVE	Description of Item or Service CALLS		0 5 0 4 1 5 Fair Market Value 13.69
COLUMBUS	Sta te OH	Zip Code 43229	Received at Fundraising Event? O YES NO
Full Name of Contributor OHIO ASSOCIATION OF PUBLIC SCH	AFL-CIO	ation, Labor Organization*	Registration Number, if PAC PAC LA 1269
Street Address 6805 OAK CREEK DRIVE	Description of Item POLLING	_	0 5 0 5 1 5 Fair Market Value 1300.87
COLUMBUS	Sta te OH	Zip Code 43229	Received at Fundraising Event? YES NO
Full Name of Contributor	Employer, Occupa	ation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Iten	n or Service	M D Y. Fair Market Value
City	Sta te OH	Zip Code	Received at Fundraising Event? OYES NO
Full Name of Contributor	Employer, Occup	ation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Iter	m or Service	M D Y Fair Market Value
City	Sta te OH	Zip Code	Received at Fundraising Event? O YES O NO
Full Name of Contributor	Employer, Occup	nation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Iter	m or Service	M D Y Fair Market Value
City	Sta te OH	Zip Code	Received at Fundraising Event? O YES O NO
Full Name of Contributor	Employer, Occup	nation, 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? O YES O NO
Full Name of Contributor	Employer, Occup	pation, Labor Organization*	Registration Number, if PAC
Street Address	Description of Ite	em or Service	M D Y Fair Market Value
City	Sta te OH	Zip Code	Received at Fundraising Event? OYES O 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)]