



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee Friends of Scott Singratsomboune				
Full Name of Contributor Scott Singratsomboune		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 395 S Ohio Ave		Description of Item or Service Petition Collection Services		Date (MM/DD/YYYY) 12/23/2018 Fair Market Value 120.00
City Columbus	State OH	Zip Code 43205	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Scott Singratsomboune		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 395 S Ohio Ave		Description of Item or Service Petition Collection Services		Date (MM/DD/YYYY) 12/24/2018 Fair Market Value 80.00
City Columbus	State OH	Zip Code 43205	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Scott Singratsomboune		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 395 S Ohio Ave		Description of Item or Service ---		Date (MM/DD/YYYY) Fair Market Value
City Columbus	State OH	Zip Code 43205	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Scott Singratsomboune		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 95 S Ohio Ave		Description of Item or Service ---		Date (MM/DD/YYYY) Fair Market Value
City Columbus	State OH	Zip Code 43205	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Scott Singratsomboune		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 395 S Ohio Ave		Description of Item or Service ---		Date (MM/DD/YYYY) Fair Market Value
City Columbus	State OH	Zip Code 43205	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 \$ 200.00