



In-Kind Contributions Received

Form 31-J-1
R.C. 3517.10

Full Name of Committee Gahanna Residents Improving Tomorrow				
Full Name of Contributor Virginia Hoffman		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 708 Waybaugh Dr	Description of Item or Service Office supplies		Date (MM/DD/YYYY) 04/07/2019	Fair Market Value 9.00
City Gahanna	State OH	Zip Code 43230	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Tom Kneeland		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 123 Serran Dr	Description of Item or Service Yard sign frames		Date (MM/DD/YYYY) 04/10/2019	Fair Market Value 15.00
City Gahanna	State OH	Zip Code 43230	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Beryl Piccolantonio		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 963 Riva Ridge Ct	Description of Item or Service Voter database		Date (MM/DD/YYYY) 04/12/2019	Fair Market Value 500.00
City Gahanna	State OH	Zip Code 43230	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor Bob Dean		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address 449 Allanby Ct	Description of Item or Service Office supplies		Date (MM/DD/YYYY) 04/15/2019	Fair Market Value 9.00
City Gahanna	State OH	Zip Code 43230	Received at Fundraising Event? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Full Name of Contributor		Employer, Occupation, Labor Organization*		Registration Number, if PAC
Street Address	Description of Item or Service		Date (MM/DD/YYYY)	Fair Market Value
City	State	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 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 \$ **533.00**